

LR-N06-0046

JAN 31 2006

Mr. Samuel Collins  
Regional Administrator  
United States Nuclear Regulatory Commission  
Region I  
475 Allendale Road  
King of Prussia, PA 19406-1415

**PSEG METRICS FOR IMPROVING THE WORK ENVIRONMENT  
SALEM AND HOPE CREEK GENERATING STATIONS  
QUARTERLY REPORT  
DOCKET NOS. 50-272, 50-311 AND 50-354**

Dear Mr. Collins:

This letter provides a copy of the PSEG Nuclear (PSEG) Safety Conscious Work Environment (SCWE) metrics for the fourth quarter 2005. PSEG put these metrics in place to objectively measure the effectiveness of the SCWE improvements at Salem and Hope Creek Generating Stations. PSEG conducted an analysis of each metric and decided whether and to what extent the results warrant additional actions.

In-depth assessments of the work environment were conducted in the first half of 2004. The Business Plan for the remainder of 2004 and for 2005 was revised to address the issues identified by these assessments. Business Objectives of SCWE, Corrective Action Program, Work Management, Leadership Effectiveness, and Facilities/Housekeeping were developed, with the first three objectives having the most significant and immediate impact on improving our work environment. The 2004/2005 Business Plan is now complete, with the exception of two Facility initiatives (i.e., renovation of the Hope Creek cafeteria and the Salem Instrumentation & Control shop) that will be completed in 2006.

Implementation of the Business Plan initiatives has resulted in substantial and visible improvements at Salem and Hope Creek Generating Stations. Significant reductions in maintenance backlogs and significant improvements in implementation of the Corrective Action Program were achieved. Safety system

ASD1

performance improved during 2005 as a result of more effectively managing our problem resolution processes and most safety system performance indicators are currently at annual top quartile performance levels. Visible facility improvements have also been made that improve the material condition of the stations as well as provide renovated workspaces for our staff.

PSEG recognizes the need to sustain these improvements. Self-assessments of SCWE and Problem Identification and Resolution (PI&R) processes noted positive changes in many areas, as well as additional opportunities for improvement. Subsequent NRC inspection of these areas concluded that progress has been made in addressing our work environment problems and, consistent with our self-assessments, noted issues that require additional action and focused attention. PSEG will continue to monitor our performance and utilize the Corrective Action Program to continuously increase the effectiveness of our improvement efforts.

An overall evaluation of our progress toward sustained performance against the "pillars" of a healthy SCWE yielded the following results:

#### **Pillar 1: Willingness to Raise Concerns**

The metric monitoring this pillar is Total Notifications Generated.

The indicator shows that site personnel continue to write Notifications at a rate indicative of a low threshold for problem reporting. There was an increase in the number of notifications generated from 2004 to 2005. Personnel surveys and interviews conducted during self-assessments indicate improvement in this area is, in part, due to a greater confidence that identified problems will be responded to and corrected. Overall performance of this metric for 2005 reflects the continued confidence of the workforce in the Corrective Action Program.

#### **Pillar 2: Effective Problem Resolution**

The metrics monitoring this pillar are Online Corrective and Elective Maintenance Backlogs, Corrective Action Problem Resolution, Condition Report Activities Overdue, Open Condition Report Evaluations with Due Date Extensions, Repeat Maintenance Issues, Operational Challenges, Unplanned Shutdown Limiting Condition of Operation (LCO) Entries, Unplanned Non-Shutdown Limiting Condition of Operation (LCO) Entries, and Safety System Unavailability (i.e., Emergency Diesel Generators, Auxiliary Feedwater

System, Chemical Volume Control and Safety Injection System, High Pressure Injection and Reactor Core Isolation Cooling Systems, and Residual Heat Removal System).

Metrics and equipment performance show that problem resolution has substantially improved.

Long-standing equipment deficiencies were resolved through a 90 percent reduction in the online corrective maintenance backlog, which reached the year-end goal of less than 15 items per unit and reflects top industry performance levels. Similarly, the online elective maintenance backlog was reduced by 48 percent, reaching the year-end goal to achieve top industry performance levels.

Evaluations in the Corrective Action Program continued to be completed in a timely manner and corrective action quality remained high. The number of open evaluations in the Corrective Action Program was reduced by 67 percent and the number of open corrective actions was reduced by 59 percent over the course of the year. A sustained focus on the behaviors that foster effective problem resolution has resulted in metrics that reflect the positive outcomes of these efforts, including a low frequency of repeat maintenance and generally low safety system unavailability.

Most safety systems performance indicators remained at annual top quartile performance levels as a result of more effectively managing our problem resolution processes. Performance in prior years is causing the three-year rolling average goal not to be met in some instances. The focus will remain on sustaining annual top quartile performance levels and improvements are expected in the three-year rolling average metrics as historical performance data is replaced.

Facility improvements have also been made, including application of approximately 450,000 square feet of new plant coatings at the stations and renovations to the workspaces of more than 40 percent of our staff. This visible effort reflects PSEG's expectations for the plant material condition as well as the value placed on improving the workspace for our personnel.

A minor change was made to the metrics for Operational Challenges, that track the number of plant operational issues warranting response by a multi-discipline team. An Event Review Team replaced the Operational Challenges

Response Team previously used for addressing these operational issues when the applicable procedure was changed to the Exelon Management Model on December 29, 2005. The two teams are equivalent and the Operational Challenge metrics have been revised accordingly with the new terminology.

### **Pillar 3: Alternate Mechanisms to Raise Concerns**

The metric monitoring this pillar is Employee Concerns Program – Concerns Confidentiality/Anonymity Request.

In 2005, PSEG completed a number of actions to address the results of an Employee Concerns Program (ECP) self-assessment as well as an NRC inspection of the program. Overall, ECP continues to provide an effective, alternate means for identifying issues. During the fourth quarter, there was a decrease in the number of total contacts and the number of confidentiality requests. There were also no anonymous concerns. An increase in the use of anonymous Notifications may be contributing to these changes. No adverse trend was detected. Outreach efforts by the ECP staff continue to communicate the important elements of this program with the workforce.

### **Pillar 4: Detection/Prevention of Retaliation & Chilling Effect**

The metric monitoring this pillar is Executive Review Board (ERB) Action Approvals.

In 2005, more than 200 Executive Review Board (ERB) reviews were performed and none of the proposed personnel actions (e.g., personnel movements, discipline) had retaliation or chilling effect implications, which demonstrates strong performance in this pillar. ECP data showed a significant decrease in retaliation/discrimination issues in the fourth quarter. This is the third consecutive quarter where the frequency of these types of issues declined. Management actions continue to reflect a sound understanding of and respect for the work environment.

In summary, performance in each pillar has shown substantial improvement due to implementation of many initiatives, including the 2004/2005 Business Plan. PSEG's ability to resolve problems has substantially improved, resulting in improvements to the work environment, facilities, and safety system performance. Continued active and open communications with personnel at all

Mr. Samuel Collins  
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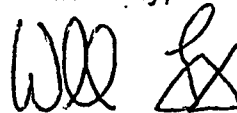
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levels in the organization, operating standards reflective of top industry performance levels, clear accountability for personnel and organizational behaviors, and strong performance in the Work Management and Corrective Action Programs will demonstrate PSEG's ability to sustain these improvements.

PSEG will continue to monitor its progress and report quarterly to the NRC. If you have any questions, please contact Darin Benyak, Regulatory Assurance Director, at 856-339-1740.

Sincerely,

A handwritten signature in black ink, appearing to be 'SC' or similar initials, followed by a stylized flourish.

Attachment



Mr. Samuel Collins  
LR-N06-0046

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USNRC Senior Resident Inspector - HC (X24)

USNRC Senior Resident Inspector - Salem (X24)

Mr. K. Tosch, Manager IV  
Bureau of Nuclear Engineering  
PO Box 415  
Trenton, NJ 08625



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Attachment I

## ATTACHMENT



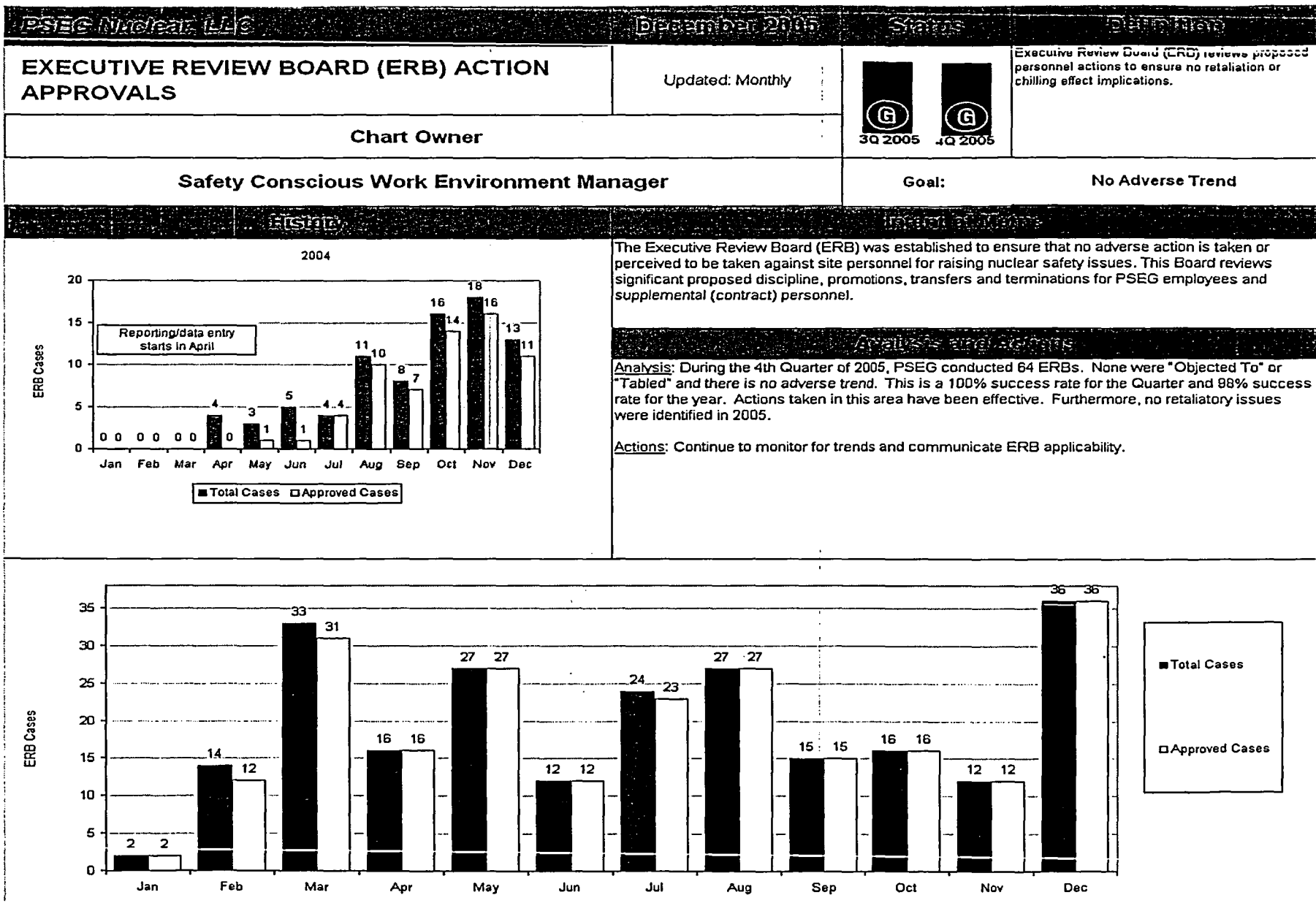
The logo for Salem Hope Creek Generating Stations. It features the words "Salem" and "Hope Creek" in a large, bold, serif font, with a stylized circular graphic element between them. Below this, the words "GENERATING STATIONS" are written in a smaller, all-caps, sans-serif font.



**Salem Hope Creek**  
GENERATING STATIONS

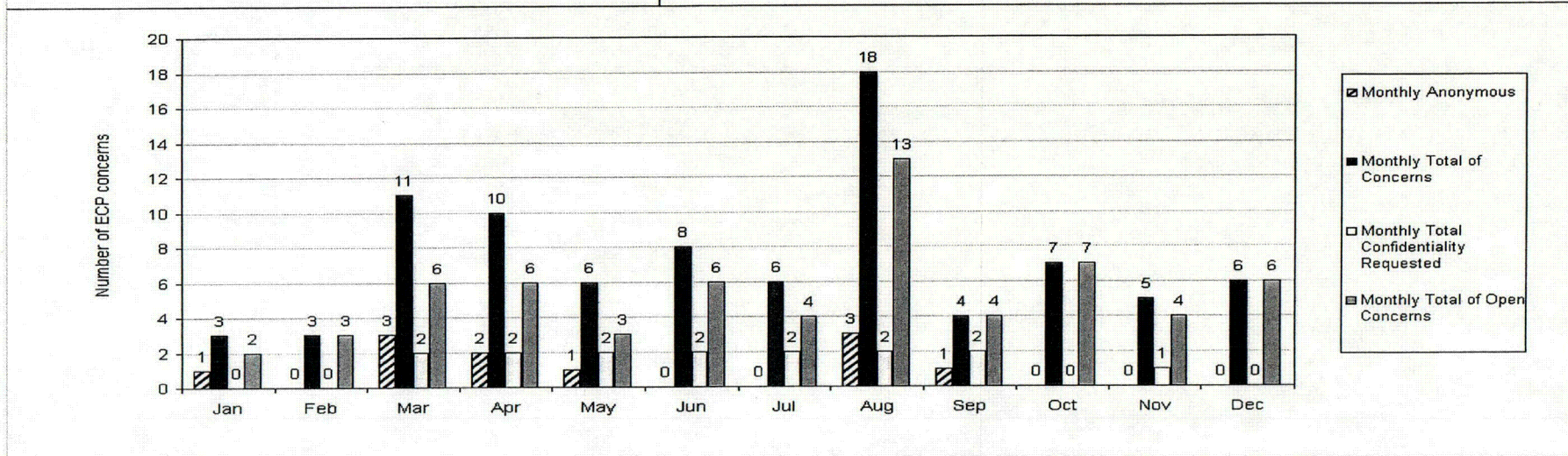
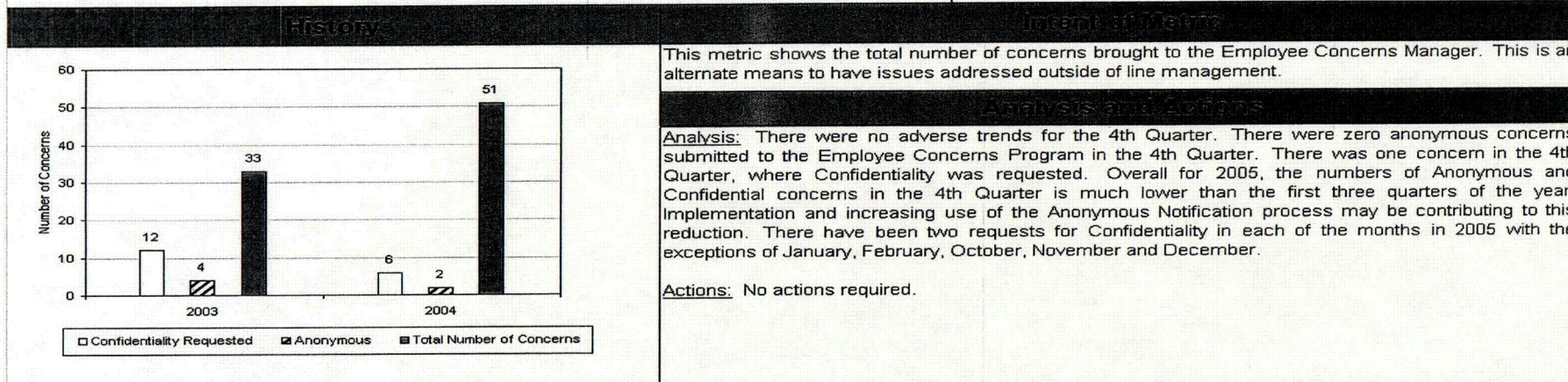
# *Safety Conscious Work Environment*



*December 2005*

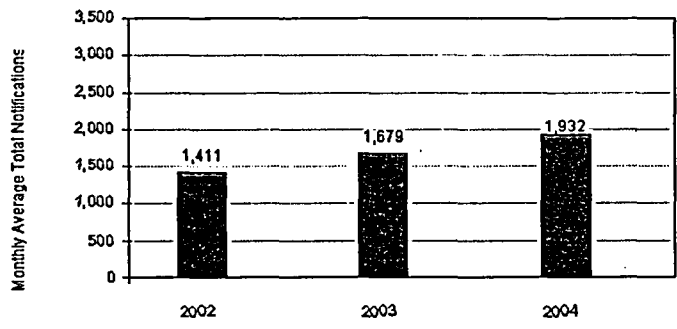


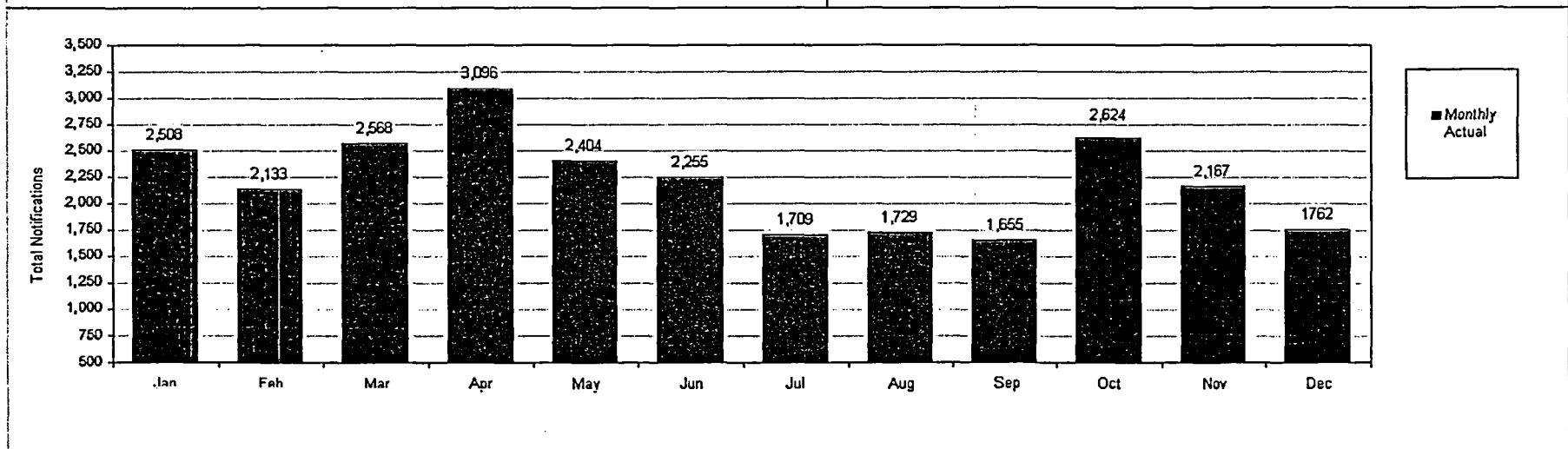


<b>PSEG Nuclear, LLC</b> <b>EMPLOYEE CONCERNS PROGRAM - CONCERNS CONFIDENTIALITY/ANONYMITY REQUEST</b>	<b>December 2005</b>  Updated: Monthly	<b>Status</b>  <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">   3Q 2005 </div> <div style="text-align: center;">   4Q 2005 </div> </div>	<b>Definition</b> The number of Employee Concerns Program concerns filed anonymously/confidentially versus total number of concerns per month. Chart does not include NRC 30-day requests.
<b>Chart Owner</b>  <b>Employee Concerns Program Manager</b>		<b>Goal:</b> <b>No Adverse Trend</b>	





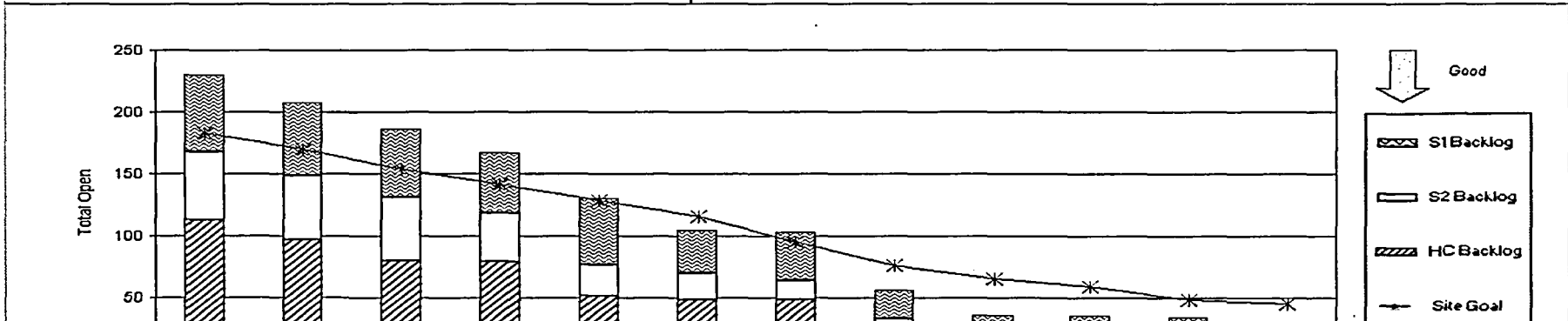
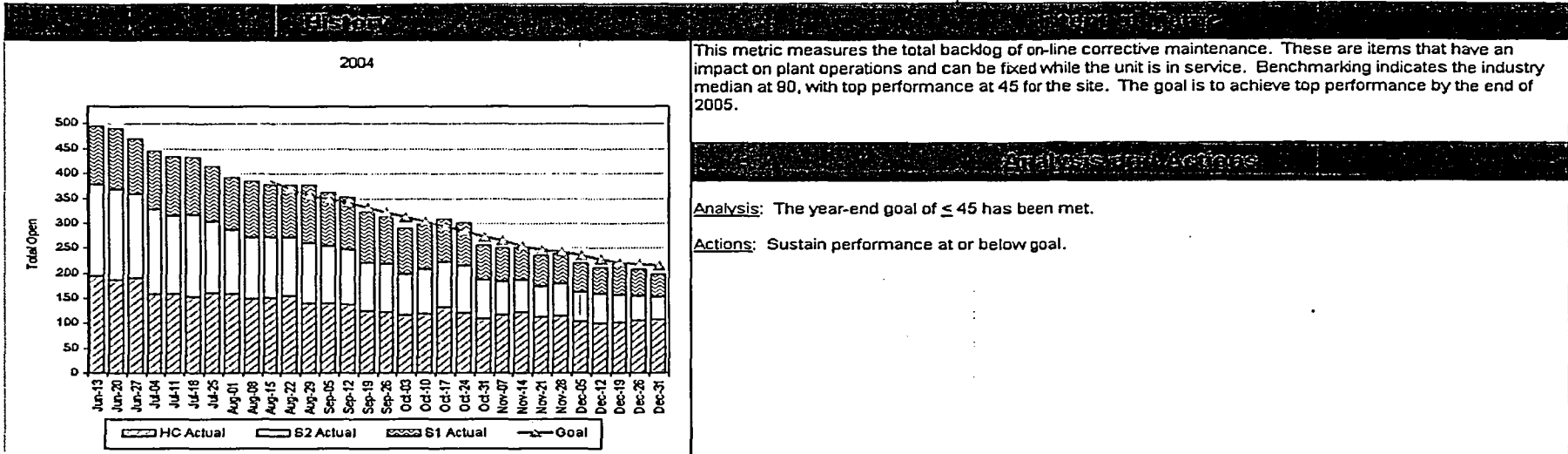
PSEG Nuclear, LLC	December 2005	STATUS	Definition
TOTAL NOTIFICATIONS GENERATED		Updated: Monthly	Total notifications generated on a monthly basis.
Chart Owner		 3Q 2005  4Q 2005	
Corrective Action Program Manager		Goal:	No Adverse Trend

History	Initiation Metric
	<p>Site personnel write a notification in the Corrective Action Program (CAP) to identify an issue that needs attention. This metric illustrates the total number of notifications written each month by site personnel. Monitoring ensures that the volume of issues is consistent with expected trends, based on past performance as well as industry perspective.</p> <p><b>Analysis and Actions:</b></p> <p><b>Analysis:</b> The average for the 4th Quarter of 2005 was 2184. This is comparable to previous 4th Quarters in 2004, at 2301 and 2003, at 1935. In December, the initiation rate decreased below the values in comparable months in past years. This decrease was anticipated based on improved plant performance that allowed personnel to take vacation in December. There is no adverse trend. The 2005 yearly average was 2218.</p> <p><b>Actions:</b> Continued monitoring of this area will be performed.</p>





ESEG Nuclear, LLC		December 2005	Status	Definition
ONLINE CORRECTIVE MAINTENANCE BACKLOG	Updated: Monthly	 3Q 2005  4Q 2005		The number of open online corrective maintenance work items.
Chart Owner				
Salem Maintenance Manager and Hope Creek Maintenance Manager			Goal:	45 by year end



## ONLINE ELECTIVE MAINTENANCE BACKLOG

Updated: Monthly

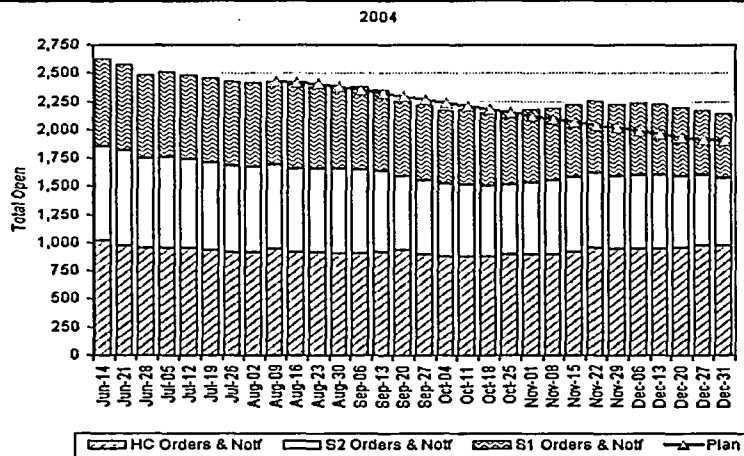


The number of open online elective maintenance work items.

**Chart Owner**

**Salem Maintenance Manager and Hope Creek Maintenance Manager**

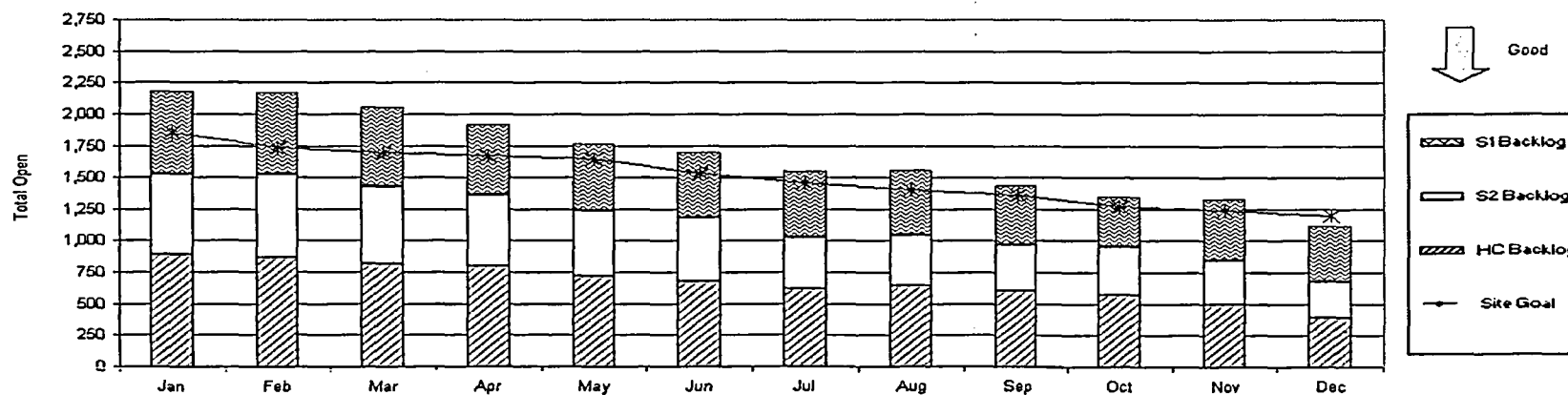
**Goal: 1,200 by year end**

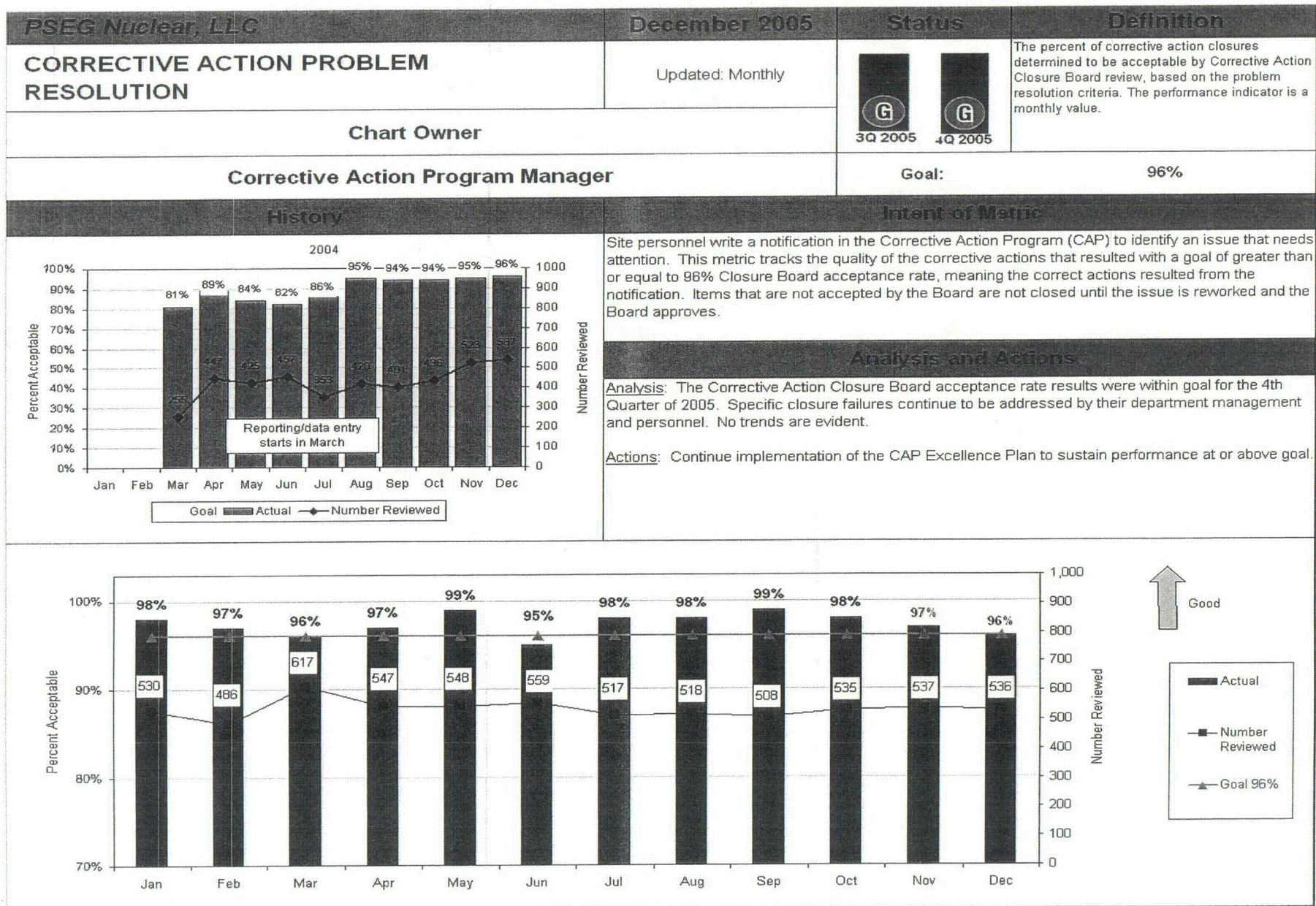


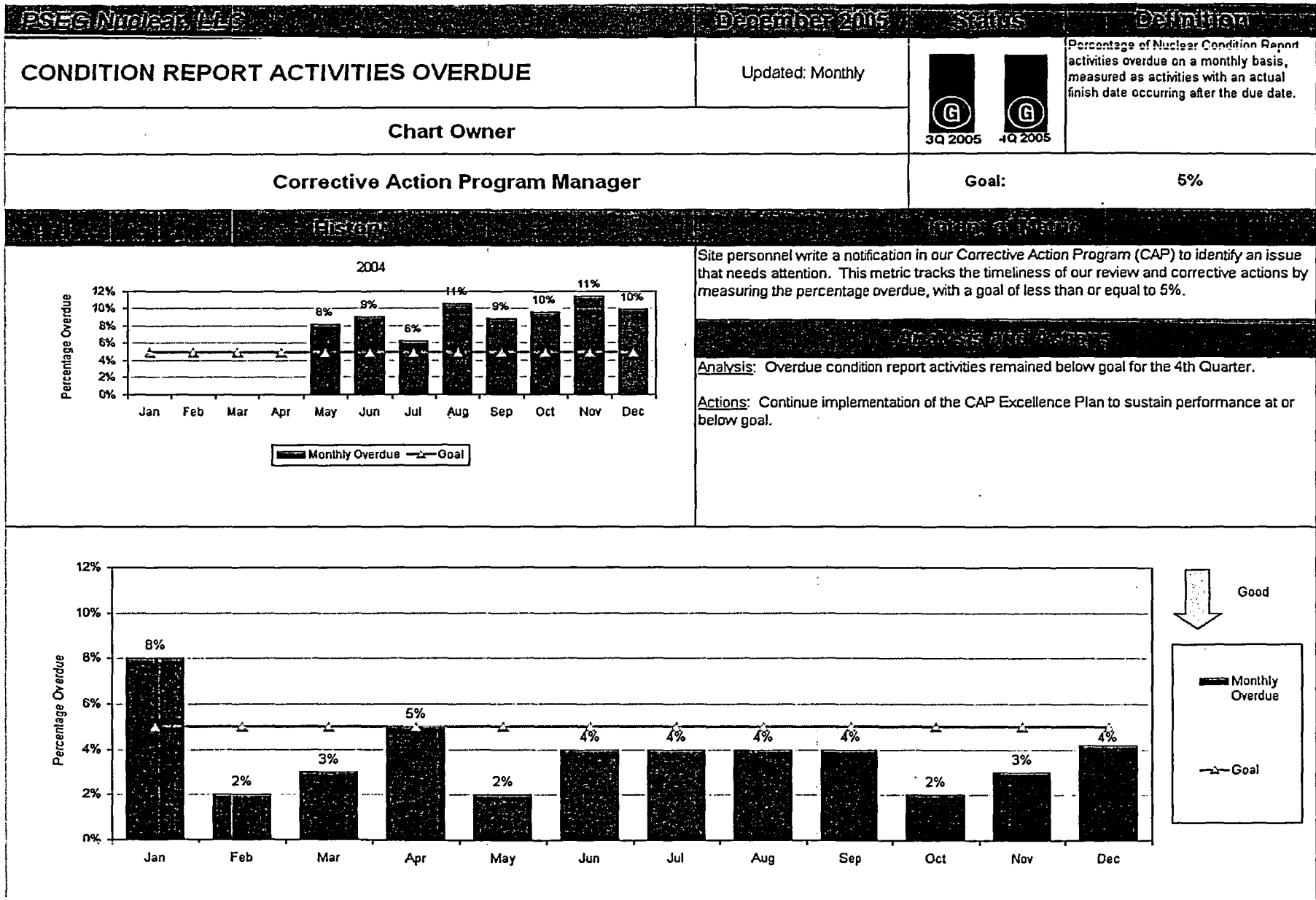
This metric measures the total backlog of on-line elective maintenance. These are items that do NOT have an impact on plant operations and can be fixed while the unit is in service. Benchmarking indicates the industry median at 1450, with top performance at 1200 for the site. The goal is to achieve top performance by the end of 2005.

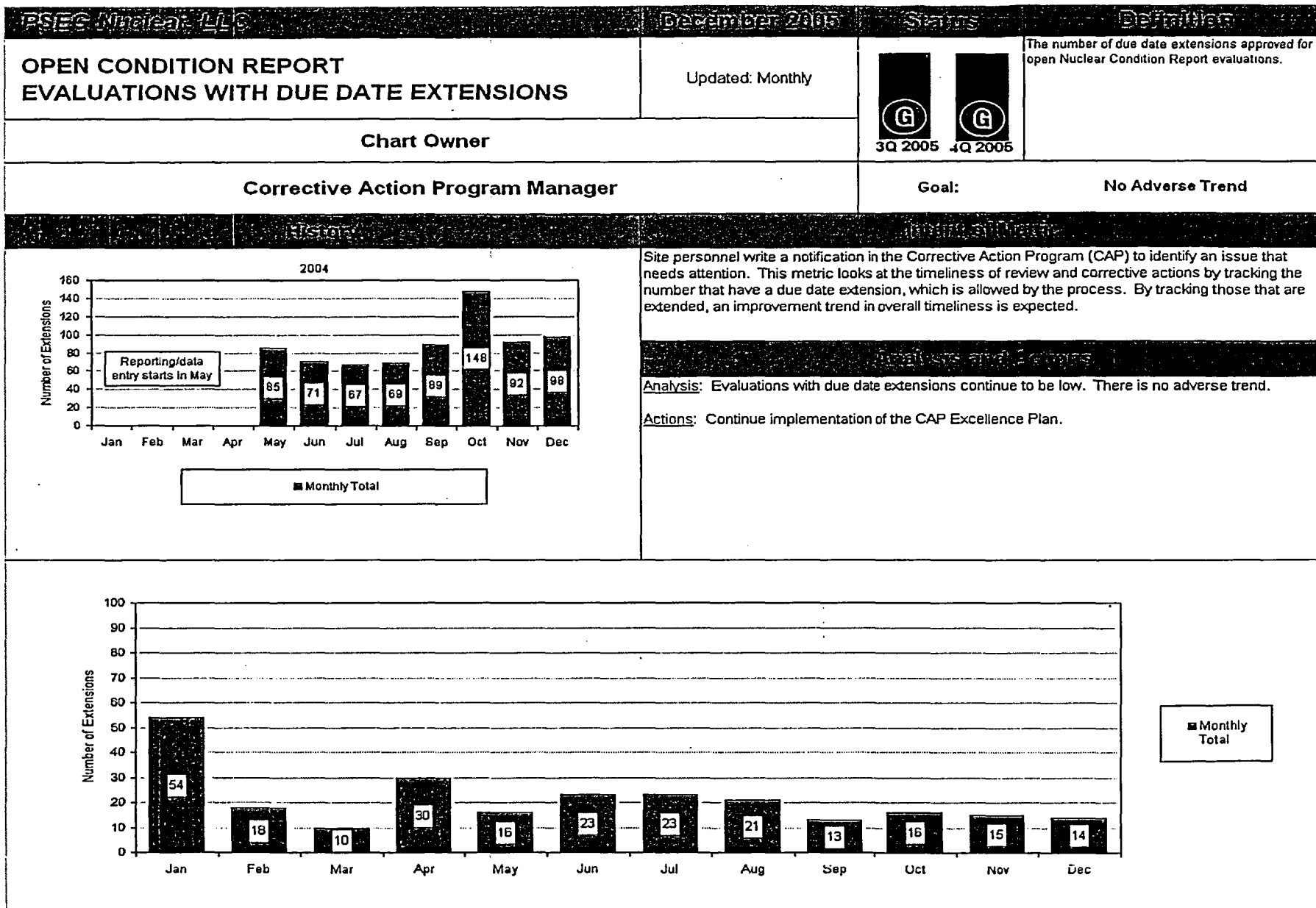
Analysis: The year-end goal of  $\leq 1,200$  was met.

Actions: Sustain performance at or below goal.

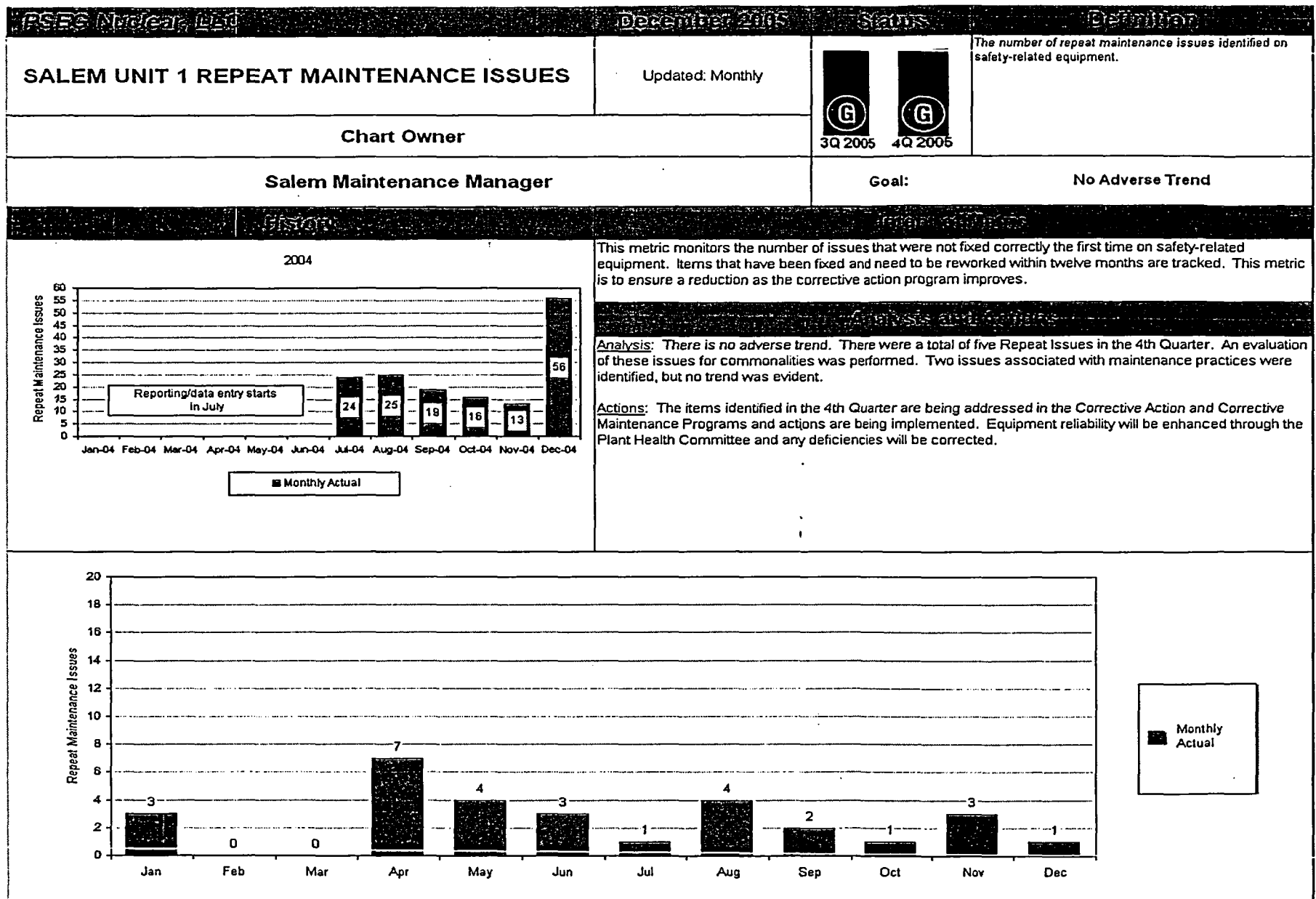


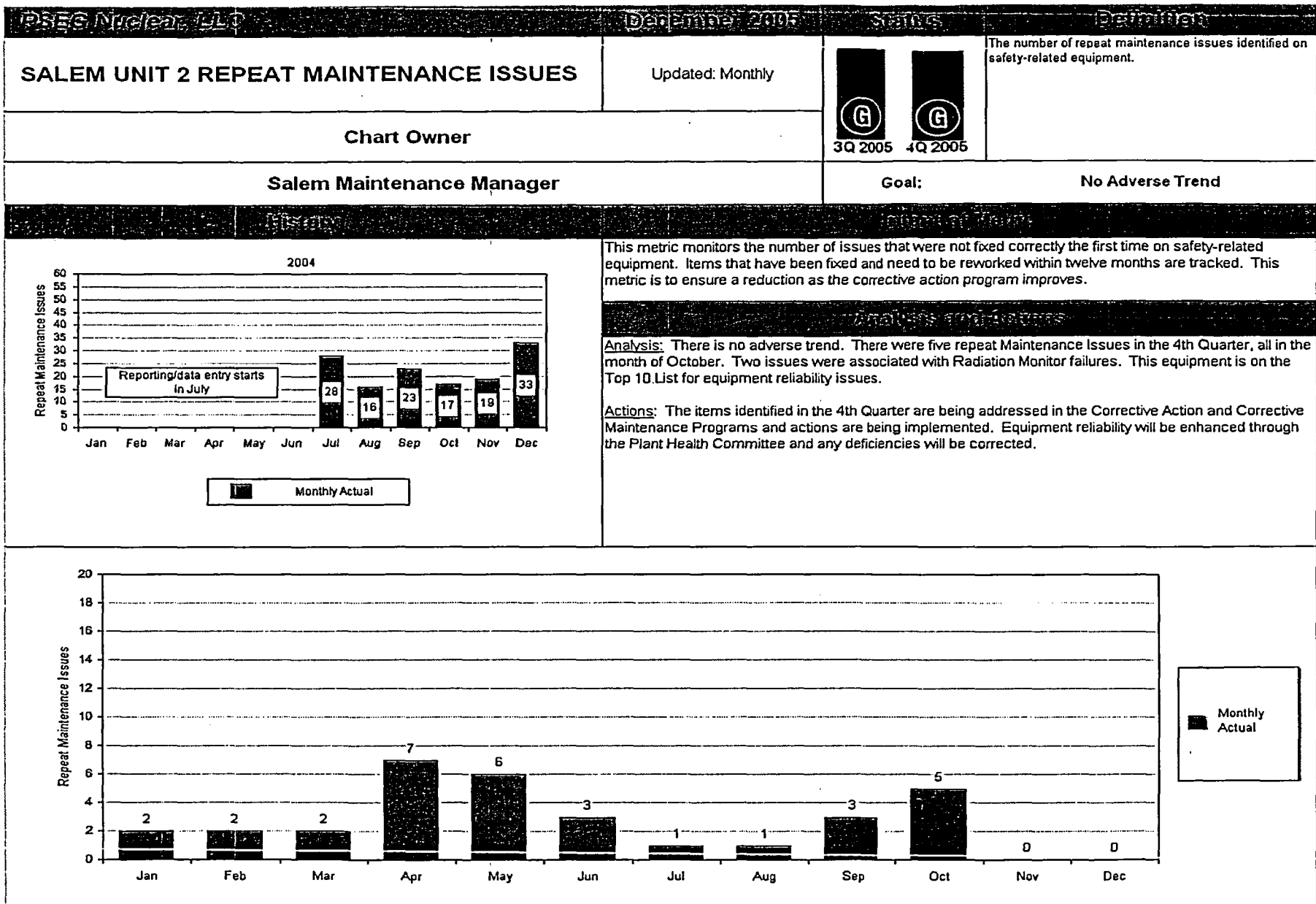


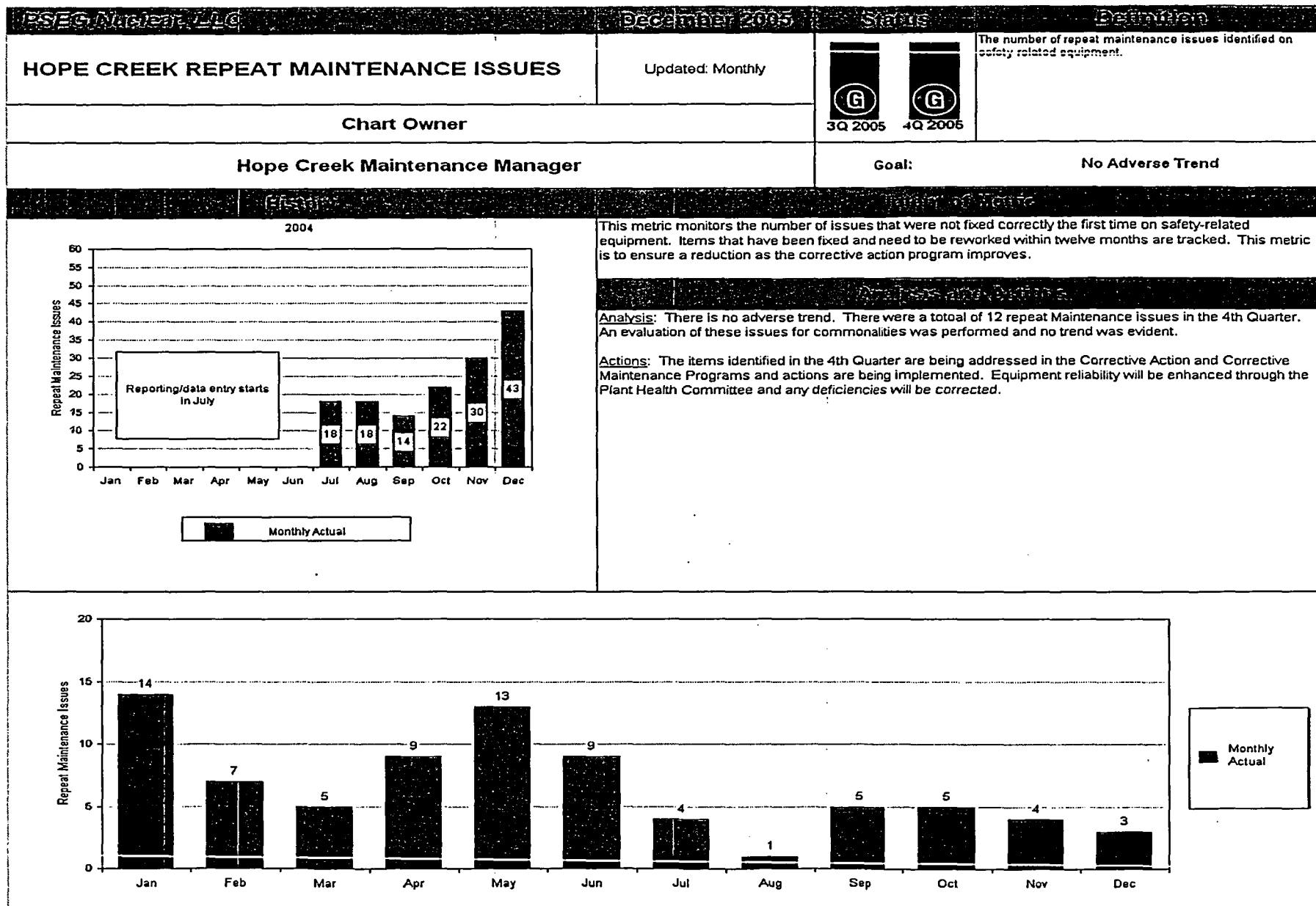






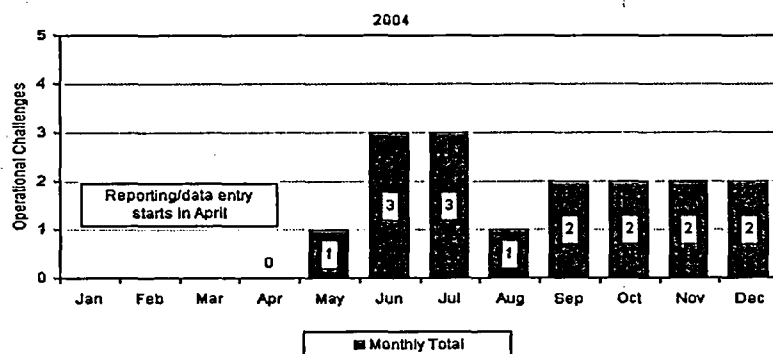








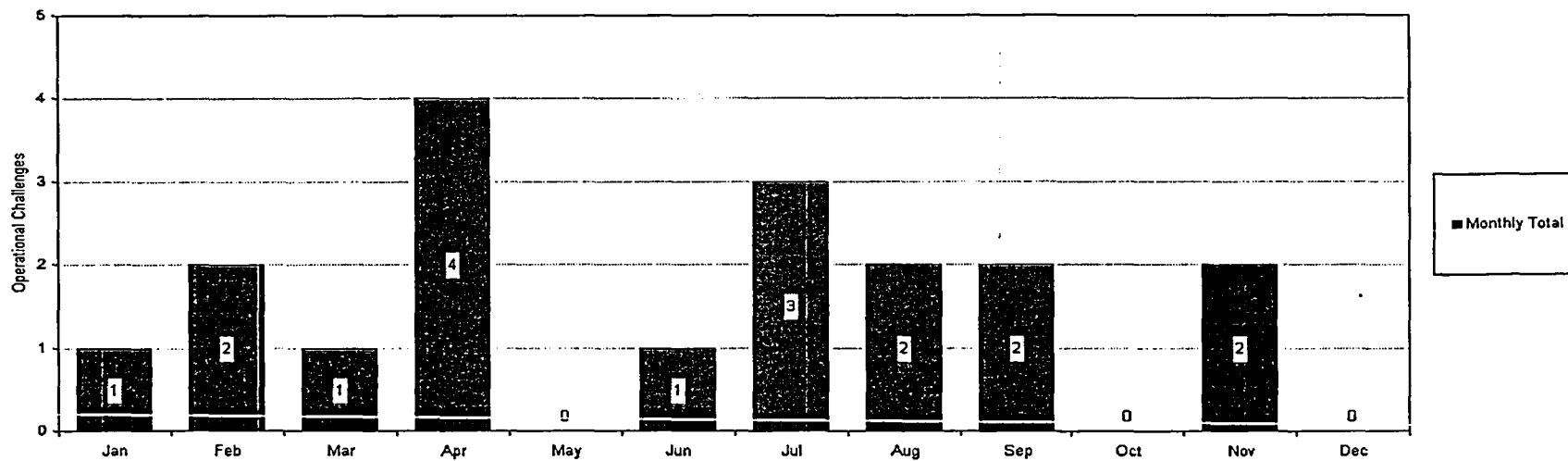
PSEG Nuclear, LLC	December 2005	Status	Definition
SALEM UNIT 1 OPERATIONAL CHALLENGES	Updated: Monthly	  3Q 2005 4Q 2005	The number of plant operational issues that warrant implementation of the Event Response Team.
Chart Owner			
Salem Plant Manager		Goal:	No Adverse Trend



A procedure was established to allow operating crews to request additional assistance to address emergent issues. These are called "Operational Challenges." This metric measures the number of times each month operators engage this assistance. The goal is to minimize the challenges to the operating crews. By tracking and reviewing the challenges, common causes and potential trends can be investigated.

**Analysis:** No adverse trend has been identified. There were two Operational Challenges initiated in the 4th Quarter. For the year there were 18 Operational Challenge Responses/Event Response Teams for Unit 1 for an average of 1.5 per month compared to an average of two per month for 2004.

**Actions:** Maintain focus on equipment reliability improvements to minimize Operational Challenges.



# SALEM UNIT 2 OPERATIONAL CHALLENGES (Includes Unit 2, Unit 3, and Common)

Updated: Monthly



The number of plant operational issues that warrant implementation of the Event Response Team.

Chart Owner

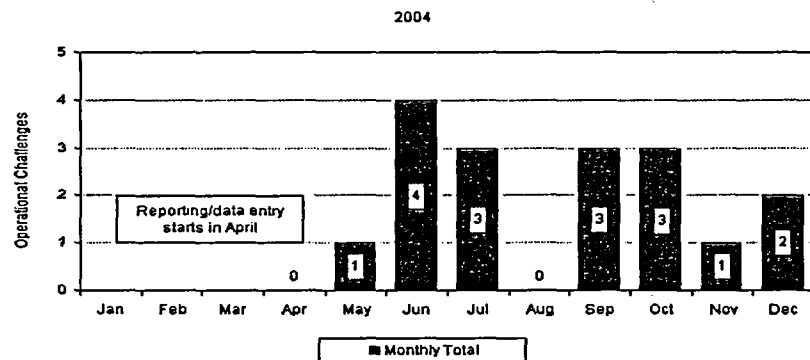
Salem Plant Manager

Goal:

No Adverse Trend

History

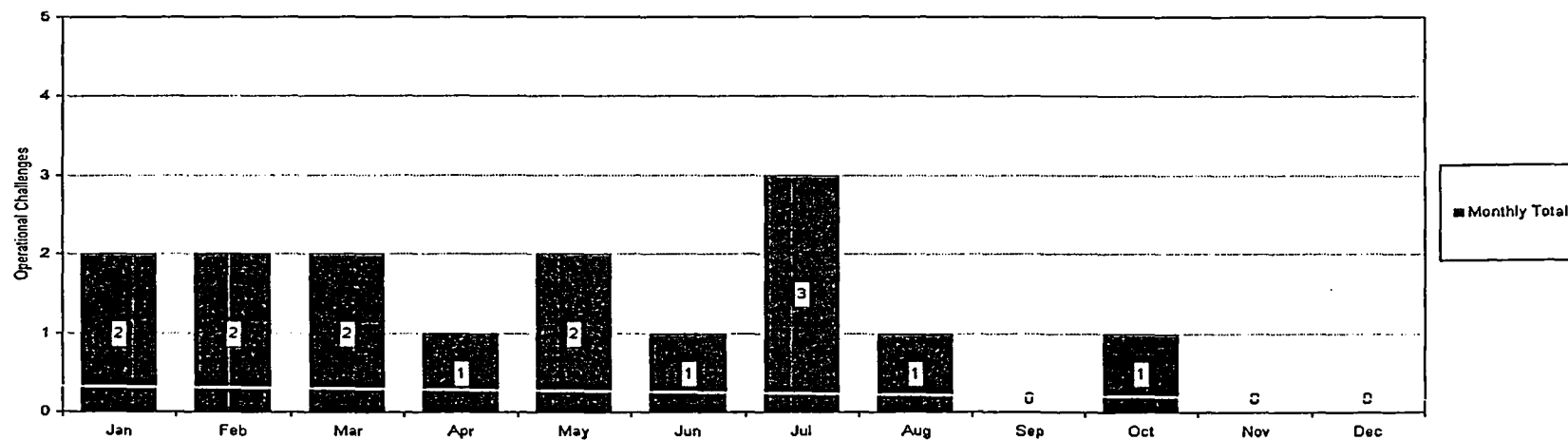
Trends

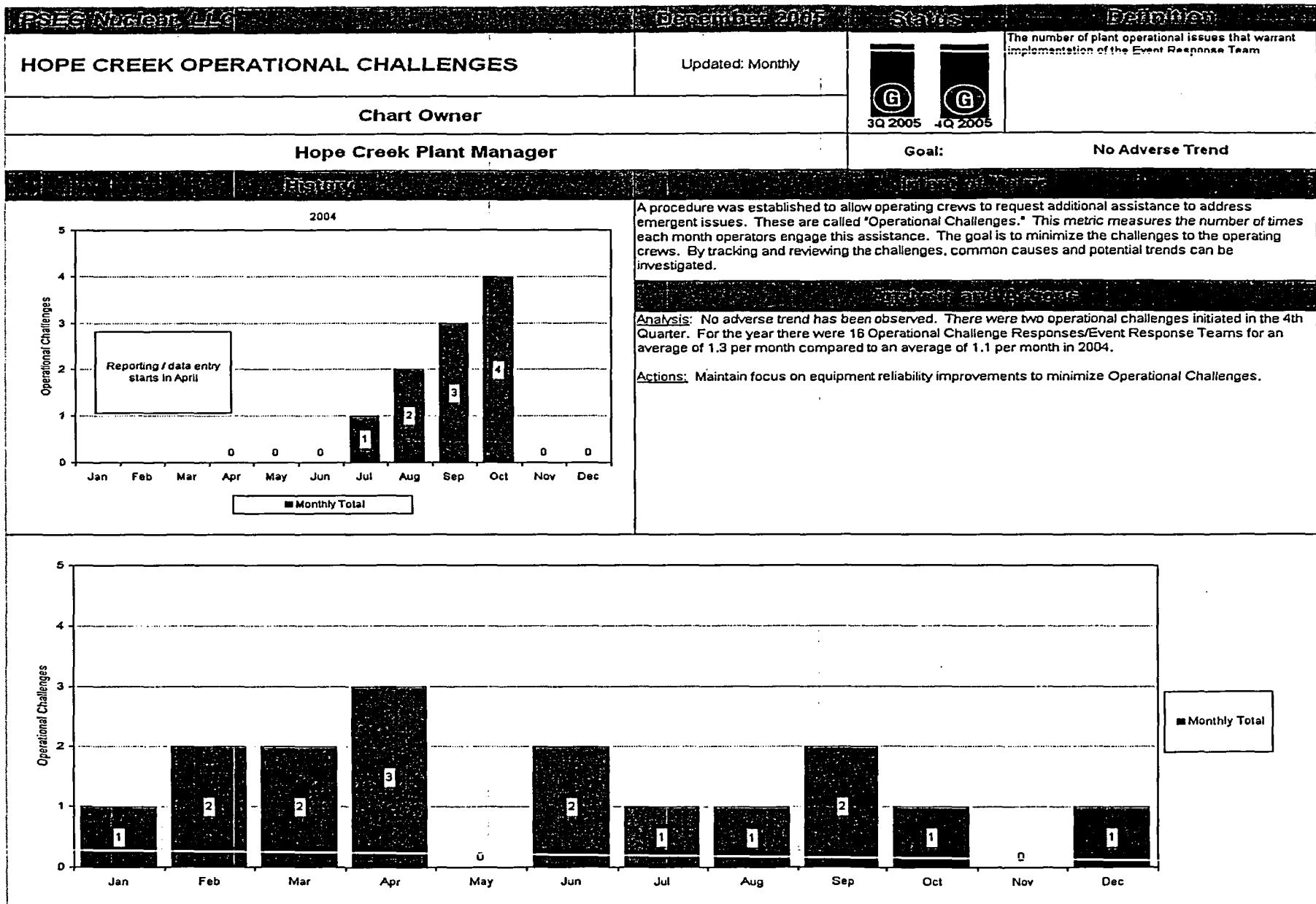




A procedure was established to allow operating crews to request additional assistance to address emergent issues. These are called "Operational Challenges." This metric measures the number of times each month operators engage this assistance. The goal is to minimize the challenges to the operating crews. By tracking and reviewing the challenges, common causes and potential trends can be investigated.

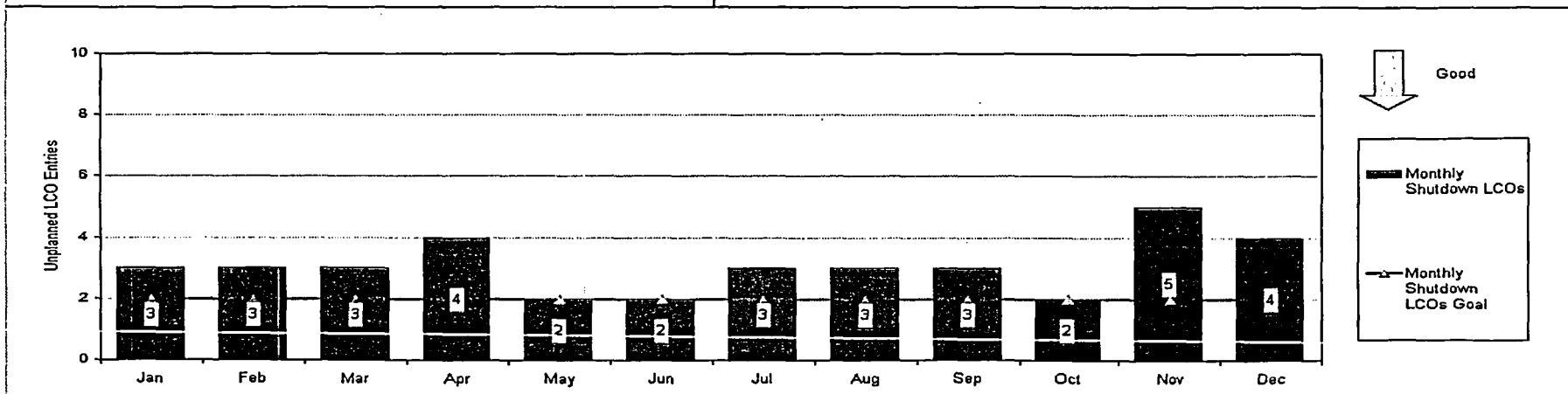
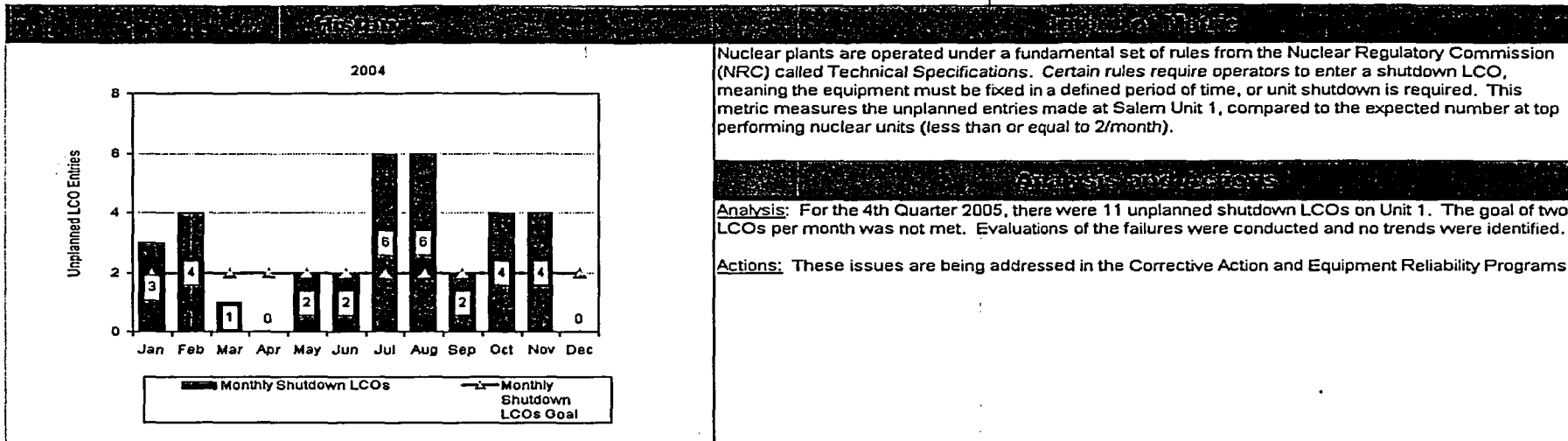
**Analysis:** No adverse trend has been identified. There was one Operational Challenge initiated in the 4th Quarter. For the year there were 15 Operational Challenge Responses/Event Response Teams for Unit 2 for an average of 1.25 per month compared to an average of 1.9 per month for 2004.

**Actions:** Maintain focus on equipment reliability improvements to minimize Operational Challenges.





PSEG Nuclear LLC	December 2005	Status	Definition
<b>SALEM UNIT 1 UNPLANNED SHUTDOWN LIMITING CONDITION OF OPERATION (LCO) ENTRIES</b>	Updated: Monthly	 	The number of Unplanned Shutdown Technical Specification Limiting Conditions of Operation (LCOs) entered during the month.
Chart Owner		3Q 2005    4Q 2005	
Salem System Engineering Manager		Goal:	2 per Month



# SALEM UNIT 1 UNPLANNED NON-SHUTDOWN LIMITING CONDITION OF OPERATION (LCO) ENTRIES

Updated: Monthly



The number of Unplanned Non-Shutdown Technical Specification Limiting Conditions of Operation (LCOs) entered during the month.

Chart Owner

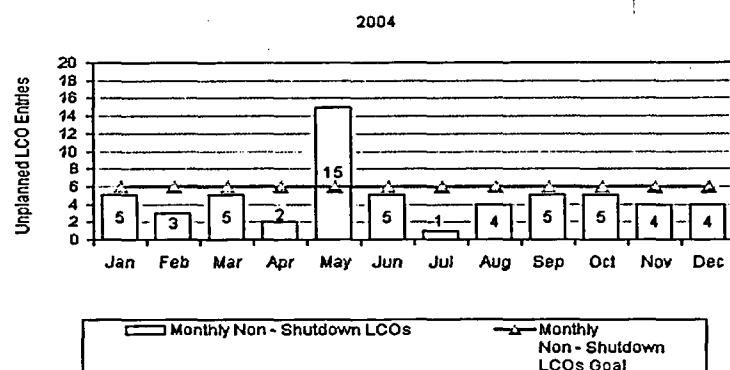
Salem System Engineering Manager

Goal:

6 per Month

History

Trends

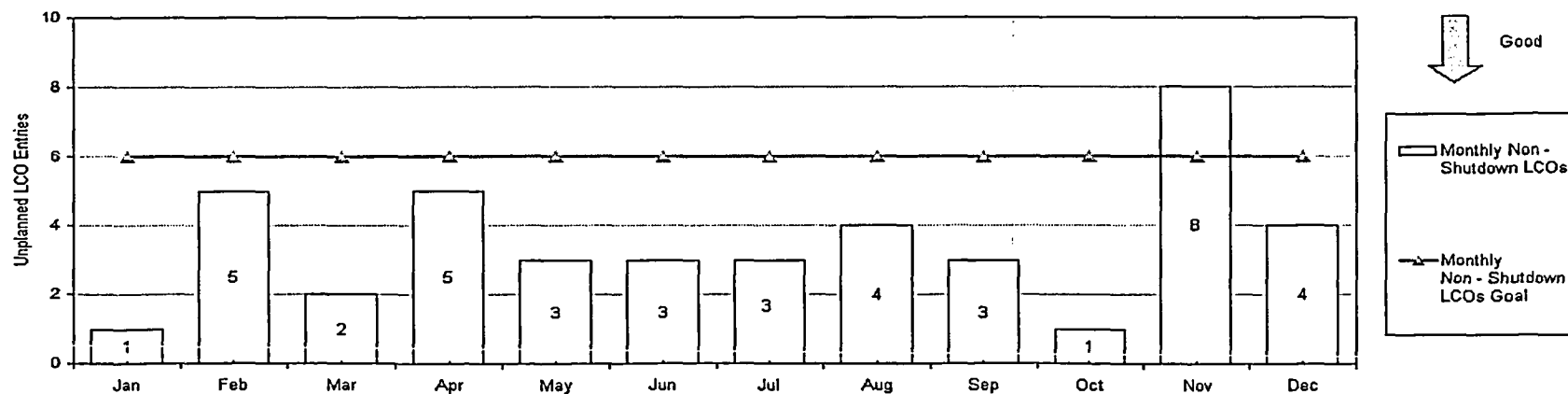


Nuclear plants are operated under a fundamental set of rules from the Nuclear Regulatory Commission (NRC) called Technical Specifications. Certain rules require operators to enter a non-shutdown LCO, meaning the equipment must be fixed in a defined period of time, or you are required to take compensatory measures. This metric measures the unplanned entries made at Salem Unit 1, compared to the expected number at top performing nuclear units (less than or equal to 6/month).

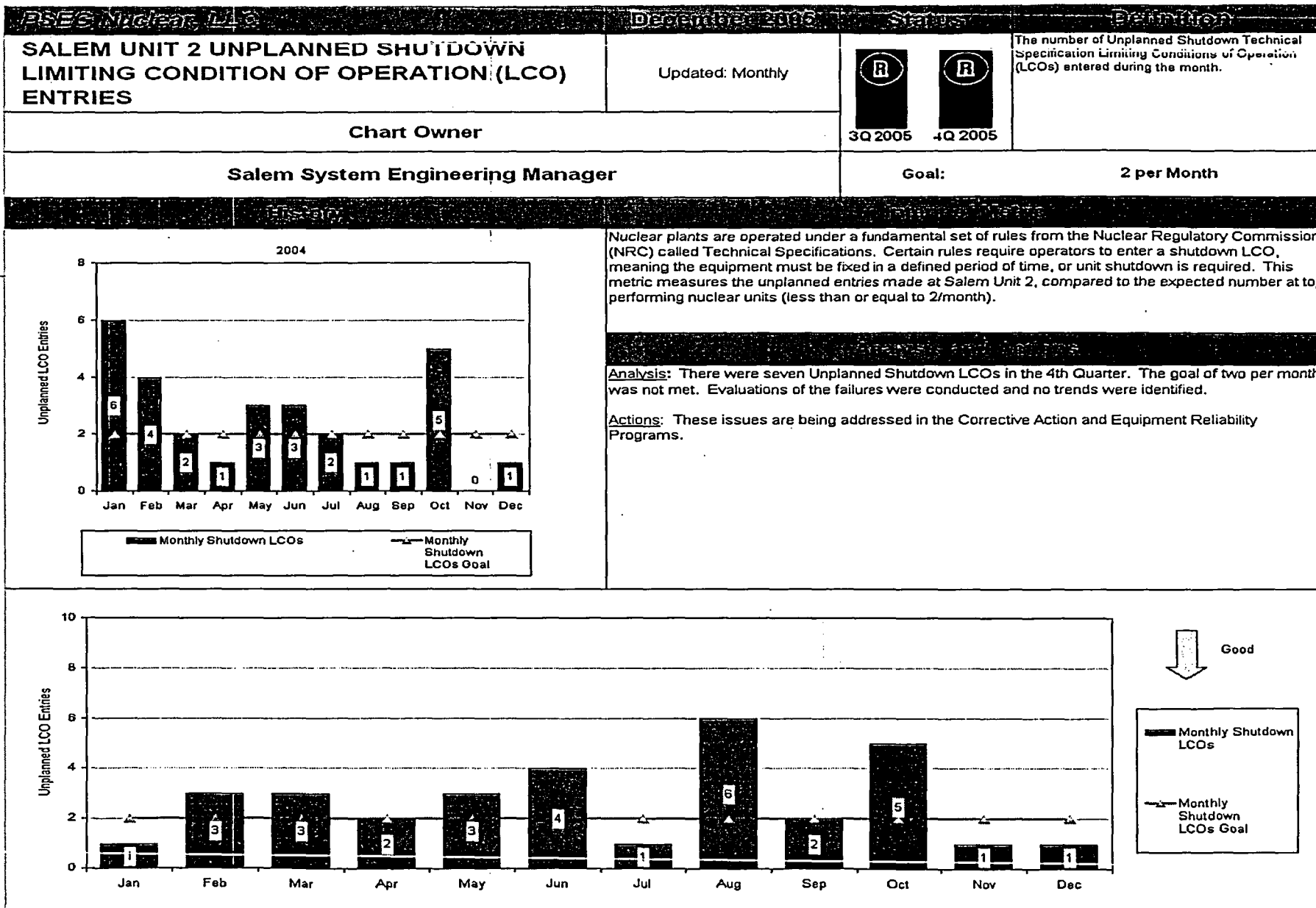
## Analysis and Actions



**Analysis:** For the 4th Quarter, there were a total of 13 Unplanned Non-Shutdown LCOs. The monthly goal for the Quarter was met. Evaluations of the failures were conducted and two adverse trends noted were in Waste Gas Analyzer and Radiation Monitor performance.

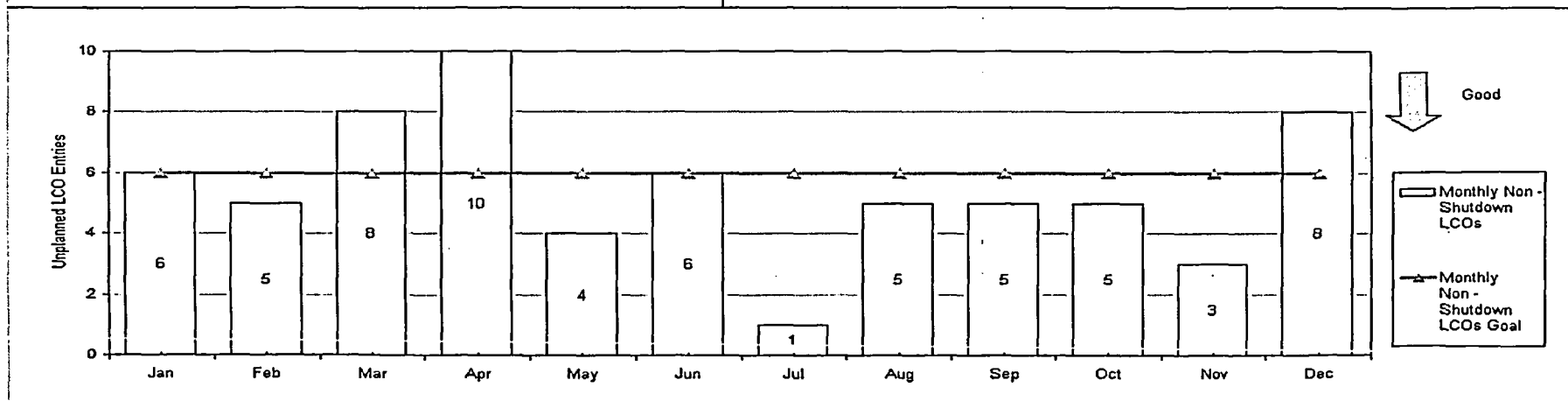
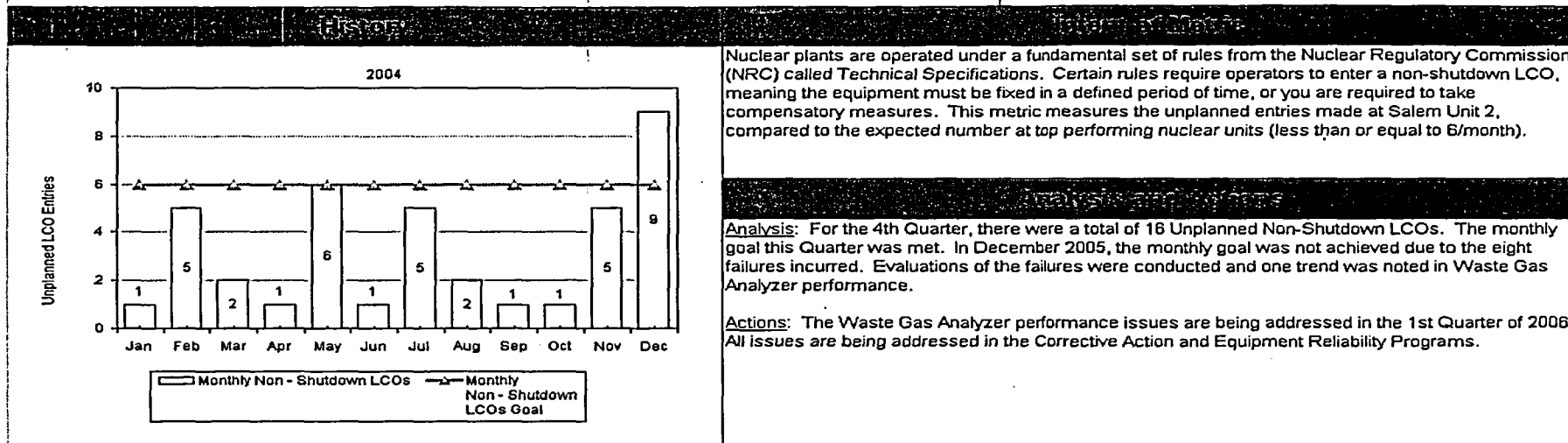
**Actions:** The Waste Gas Analyzer and Radiation Monitor performance issues are being addressed in the 1st Quarter of 2006. All issues are being addressed in the Corrective Action and Equipment Reliability Programs.



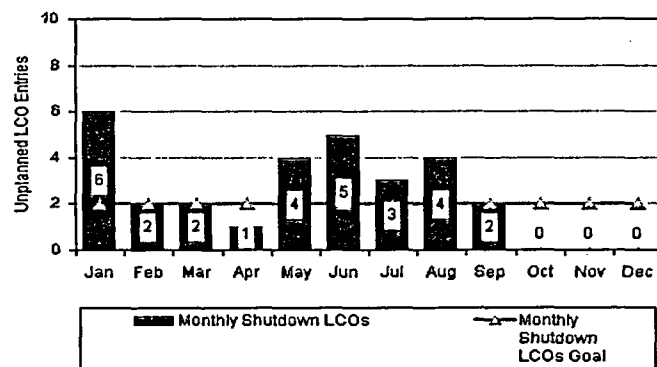




PSEG Nuclear LLC	December 2005	Status	Definition
SALEM UNIT 2 UNPLANNED NON-SHUTDOWN LIMITING CONDITION OF OPERATION (LCO) ENTRIES	Updated: Monthly	 3Q 2005  4Q 2005	The number of Unplanned Non-Shutdown Technical Specification Limiting Conditions of Operation (LCOs) entered during the month.
Chart Owner			
Salem System Engineering Manager		Goal:	6 per Month



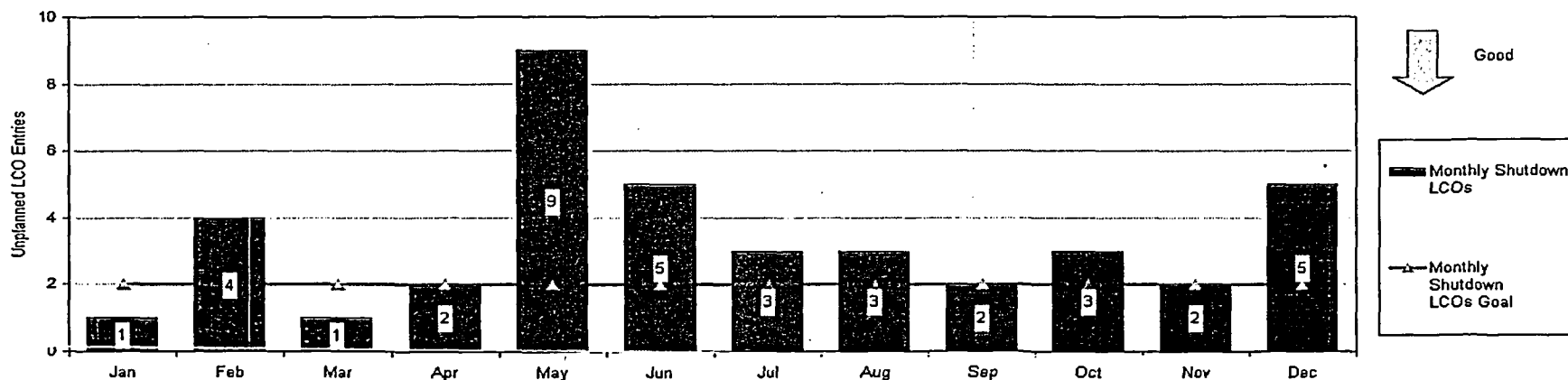
PSEG Nuclear, LLC	December 2005	Status	Definition
<b>HOPE CREEK UNPLANNED SHUTDOWN LIMITING CONDITION OF OPERATION (LCO) ENTRIES</b>	Updated: Monthly	<div> <div>R</div> <div>3Q 2005</div> </div> <div> <div>R</div> <div>4Q 2005</div> </div>	The number of Unplanned Shutdown Technical Specification Limiting Conditions of Operation (LCOs) entered during the month.
<b>Chart Owner</b>			
<b>Hope Creek Site Engineering Director</b>		<b>Goal:</b>	<b>2 per Month</b>



Nuclear plants are operated under a fundamental set of rules from the Nuclear Regulatory Commission (NRC) called Technical Specifications. Certain rules require operators to enter a shutdown LCO, meaning the equipment must be fixed in a defined period of time, or unit shutdown is required. This metric measures the unplanned entries made at Hope Creek, compared to the expected number at top performing nuclear units (less than or equal to 2/month).

**Analysis:** There were a total of 10 Unplanned Shutdown LCOs in the 4th Quarter. The goal of two per month was not met. Three of the failures were attributable to a single intermittent electronic failure associated with the Drywell Leak Detection Noble Gas Radiation Monitor that is now corrected.

**Actions:** These issues are being addressed in the Corrective Action and Equipment Reliability Programs.



## HOPE CREEK UNPLANNED NON-SHUTDOWN LIMITING CONDITION OF OPERATION (LCO) ENTRIES

Updated: Monthly



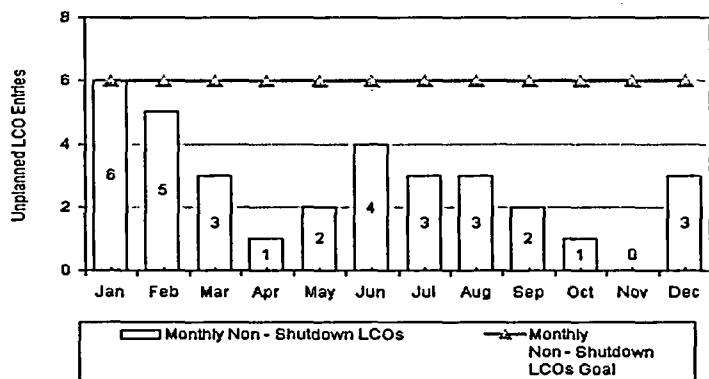
The number of Unplanned Non-Shutdown Technical Specification Limiting Conditions of Operation (LCOs) entered during the month.

Chart Owner

Hope Creek Site Engineering Director

Goal:

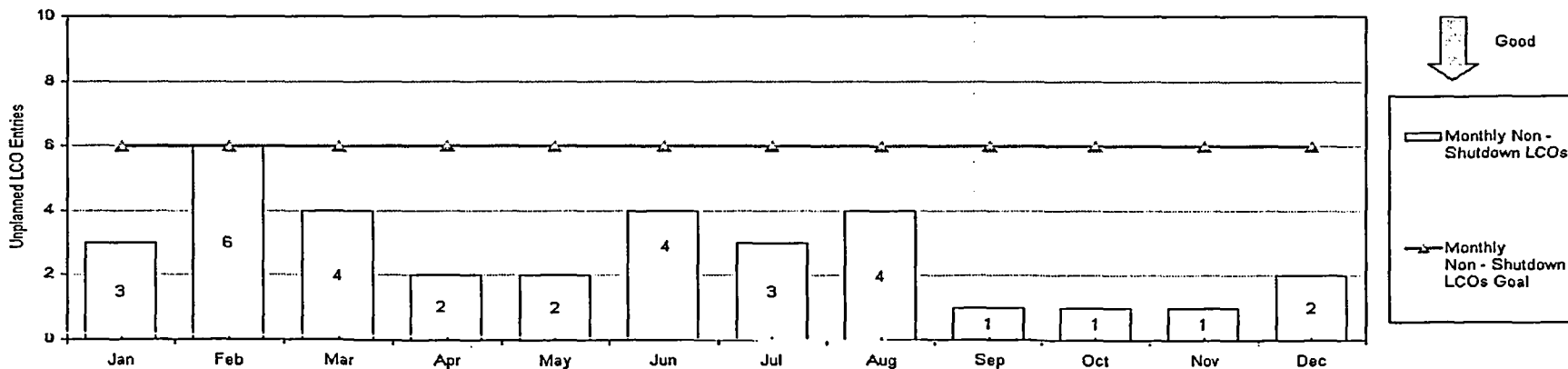
6 per Month

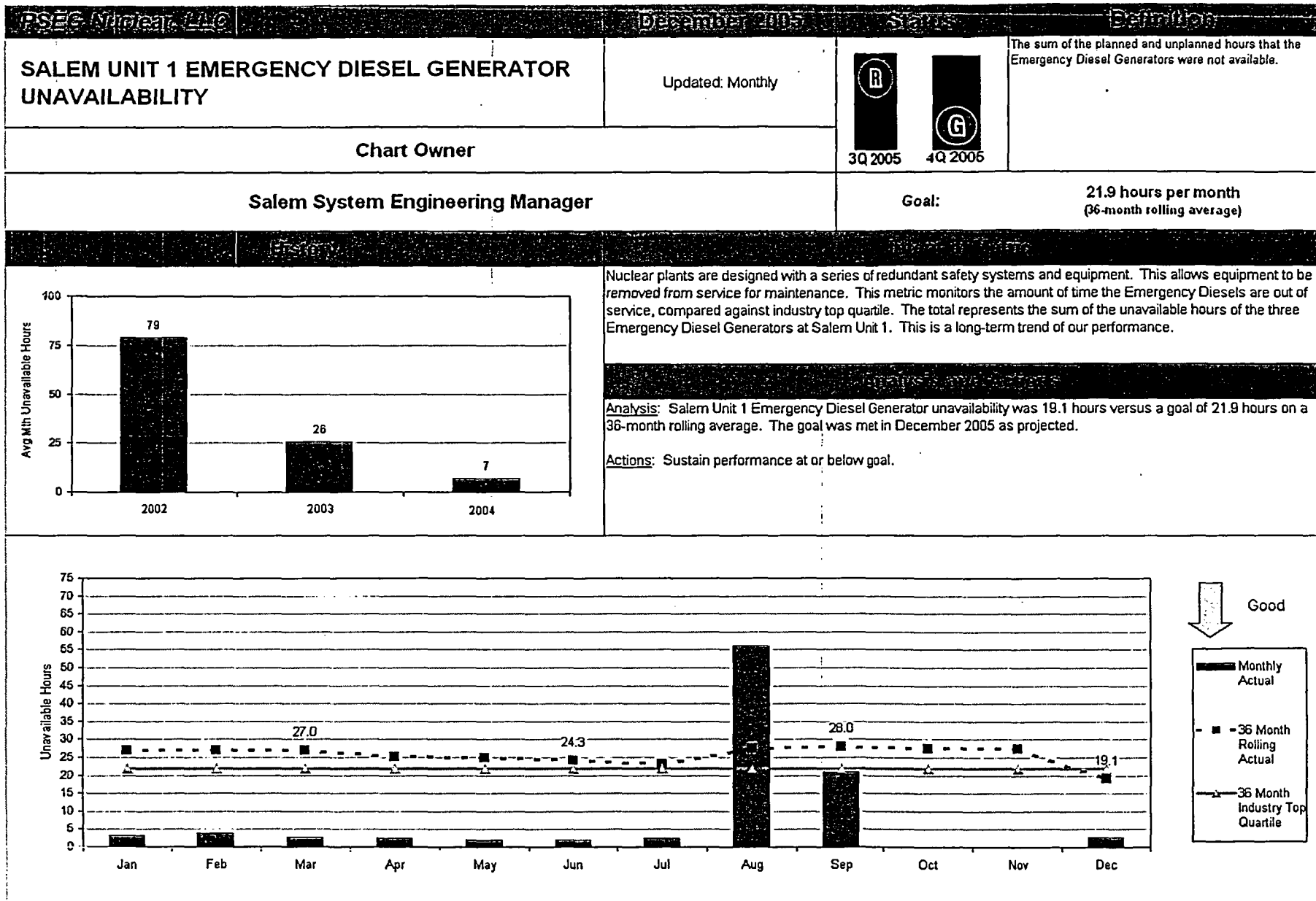


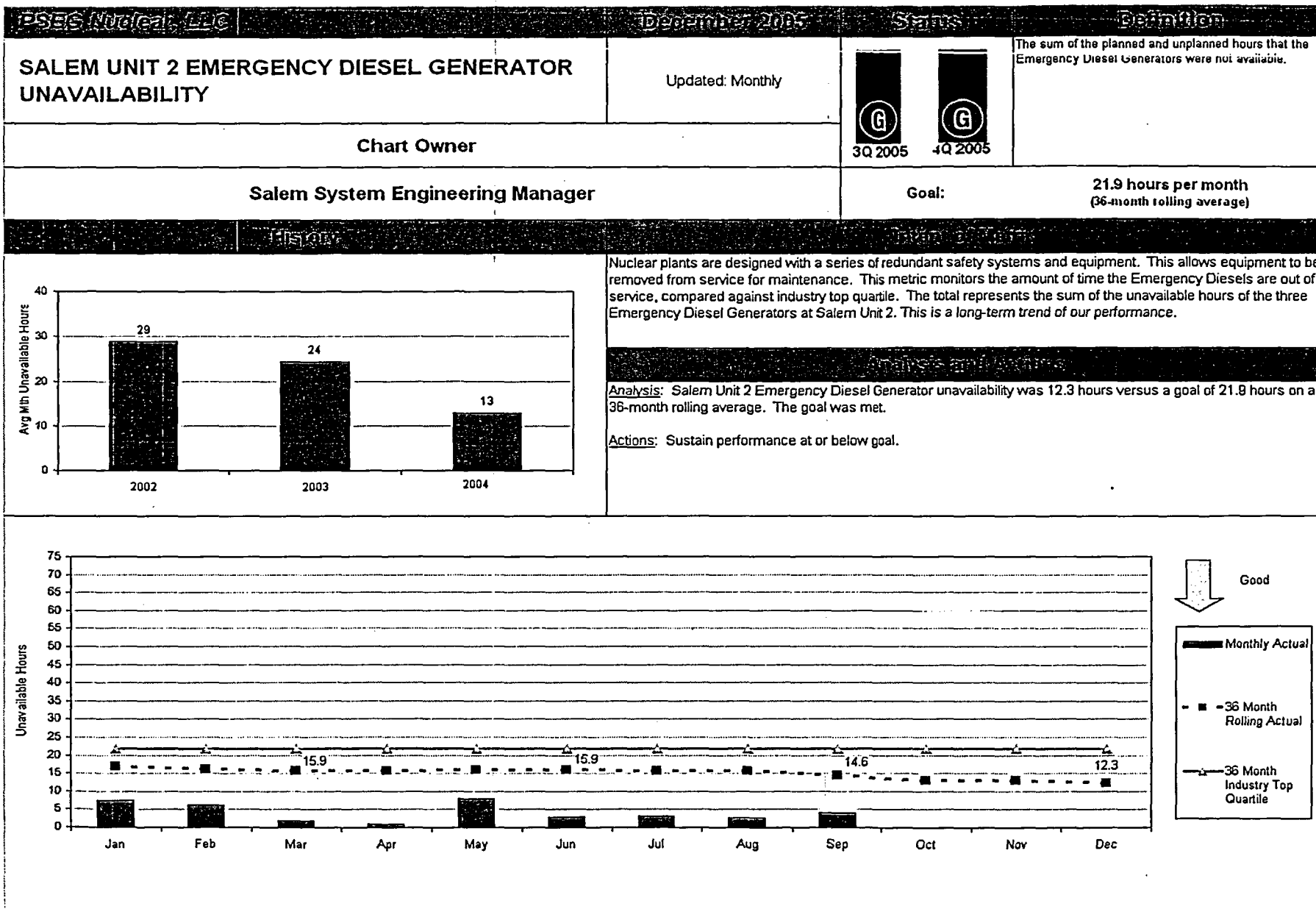
Nuclear plants are operated under a fundamental set of rules from the Nuclear Regulatory Commission (NRC) called Technical Specifications. Certain rules require operators to enter a non-shutdown LCO, meaning the equipment must be fixed in a defined period of time, or you are required to take compensatory measures. This metric measures the unplanned entries made at Hope Creek, compared to the expected number at top performing nuclear units (less than or equal to 6/month).

**Analysis:** There were a total of four Unplanned Non-Shutdown LCOs for the 4th Quarter. The goal of six per month was met.

**Actions:** Sustain performance at or below goal.







# HOPE CREEK EMERGENCY DIESEL GENERATOR UNAVAILABILITY

Updated: Monthly



3Q 2005



4Q 2005

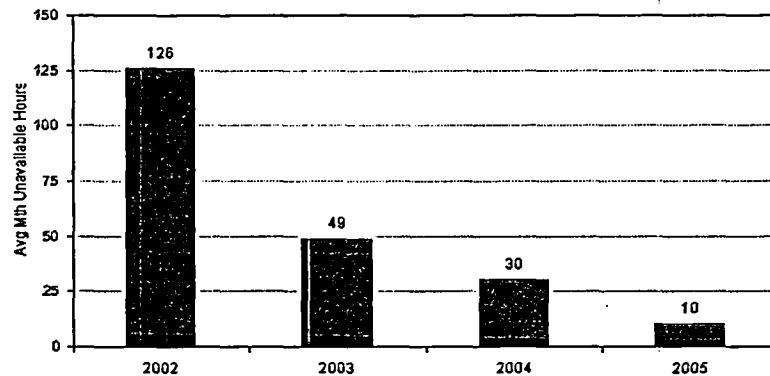
The sum of the planned and unplanned hours that the Emergency Diesel Generators were not available.

Chart Owner

Hope Creek System Engineering Manager

Goal:

29.2 hours per month  
(36-month rolling average)

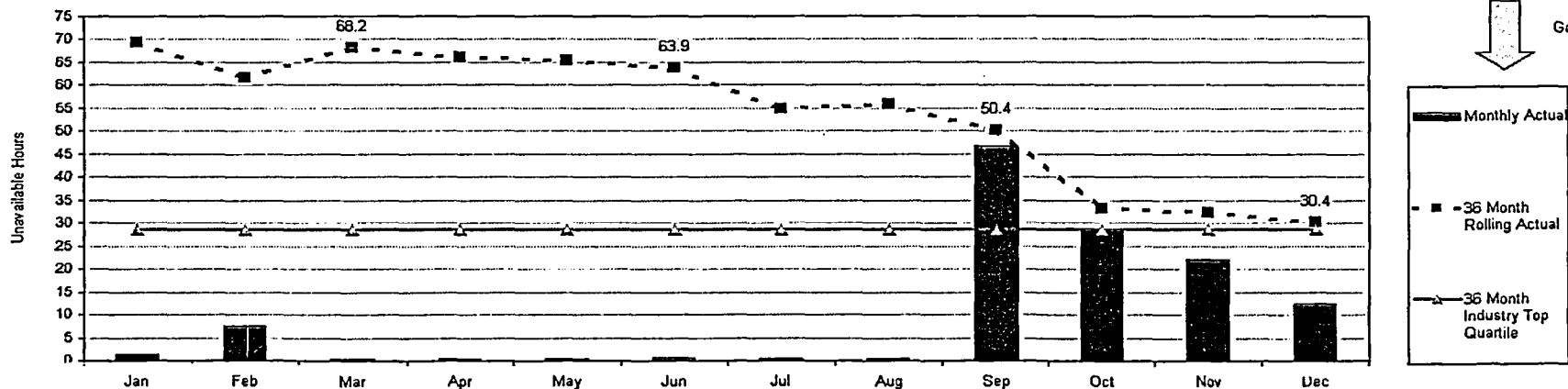


Nuclear plants are designed with a series of redundant safety systems and equipment. This allows equipment to be removed from service for maintenance. This metric monitors the amount of time the Emergency Diesels are out of service, compared against industry top quartile. The total represents the sum of the unavailable hours of the four Emergency Diesel Generators at Hope Creek. This is a long-term trend of our performance.

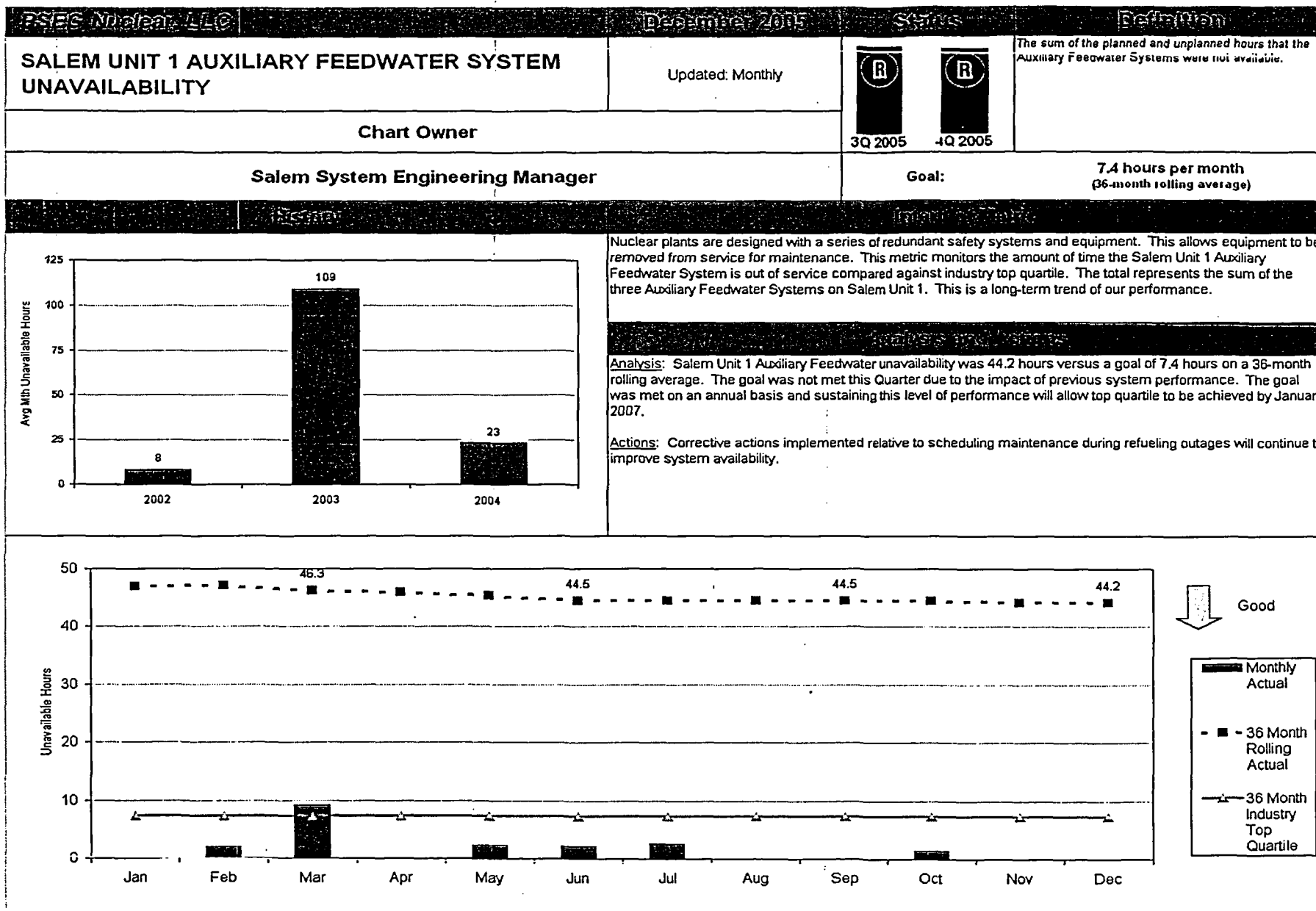
**Analysis:** Hope Creek Emergency Diesel Generator unavailability was 30.4 hours versus a goal of 29.2 hours on a 36-month rolling average. The goal was not met for the 36-month rolling average due to the impact of the previous performance in 2002 & 2003. In the 4th Quarter 2004, extensive actions were completed to improve diesel generator reliability. Based on current level of performance and good reliability, the goal will be met by June 2006.

The unavailability hours in the 4th Quarter were due to scheduled maintenance.

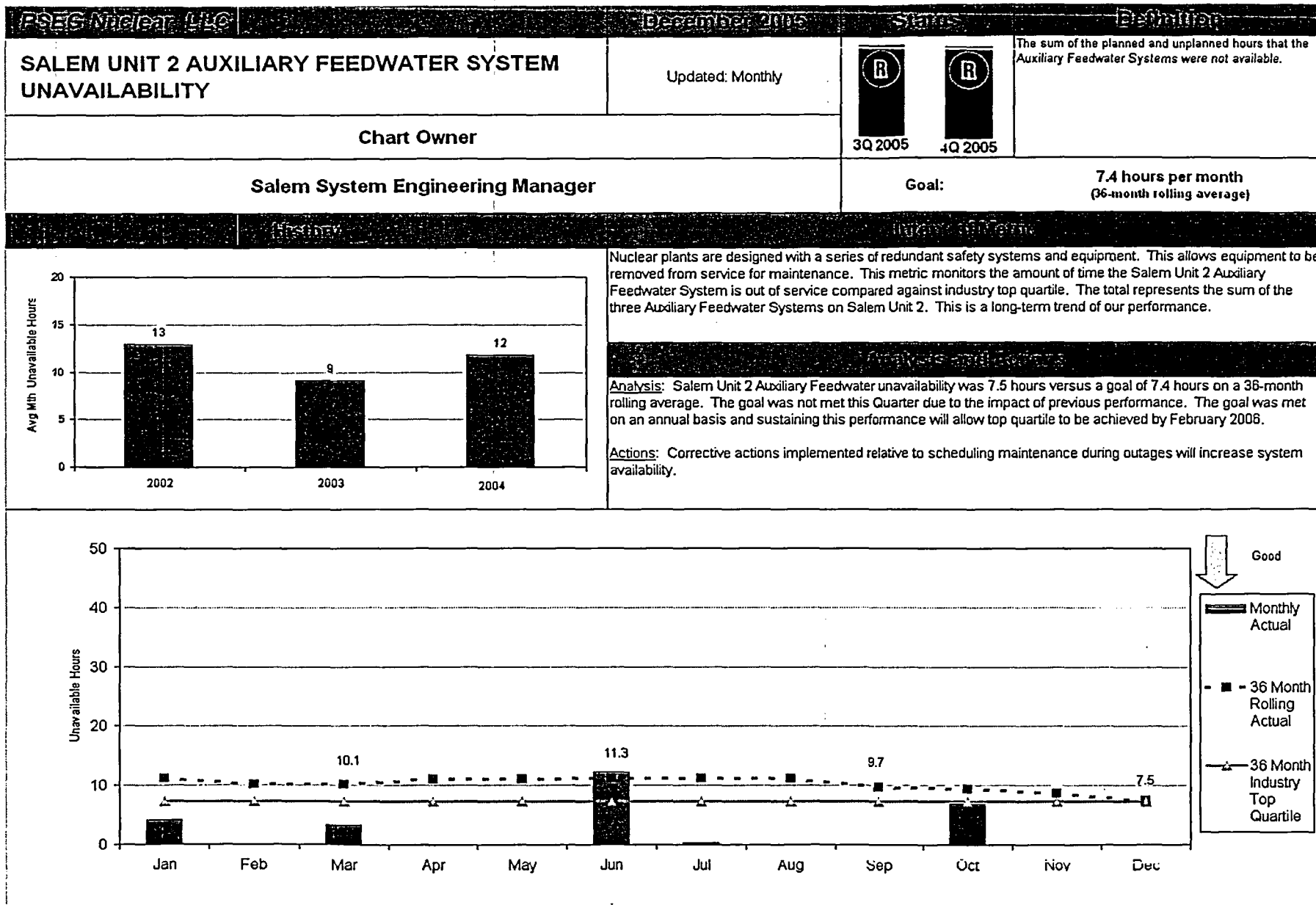
**Actions:** Continue to maintain a high level of availability.

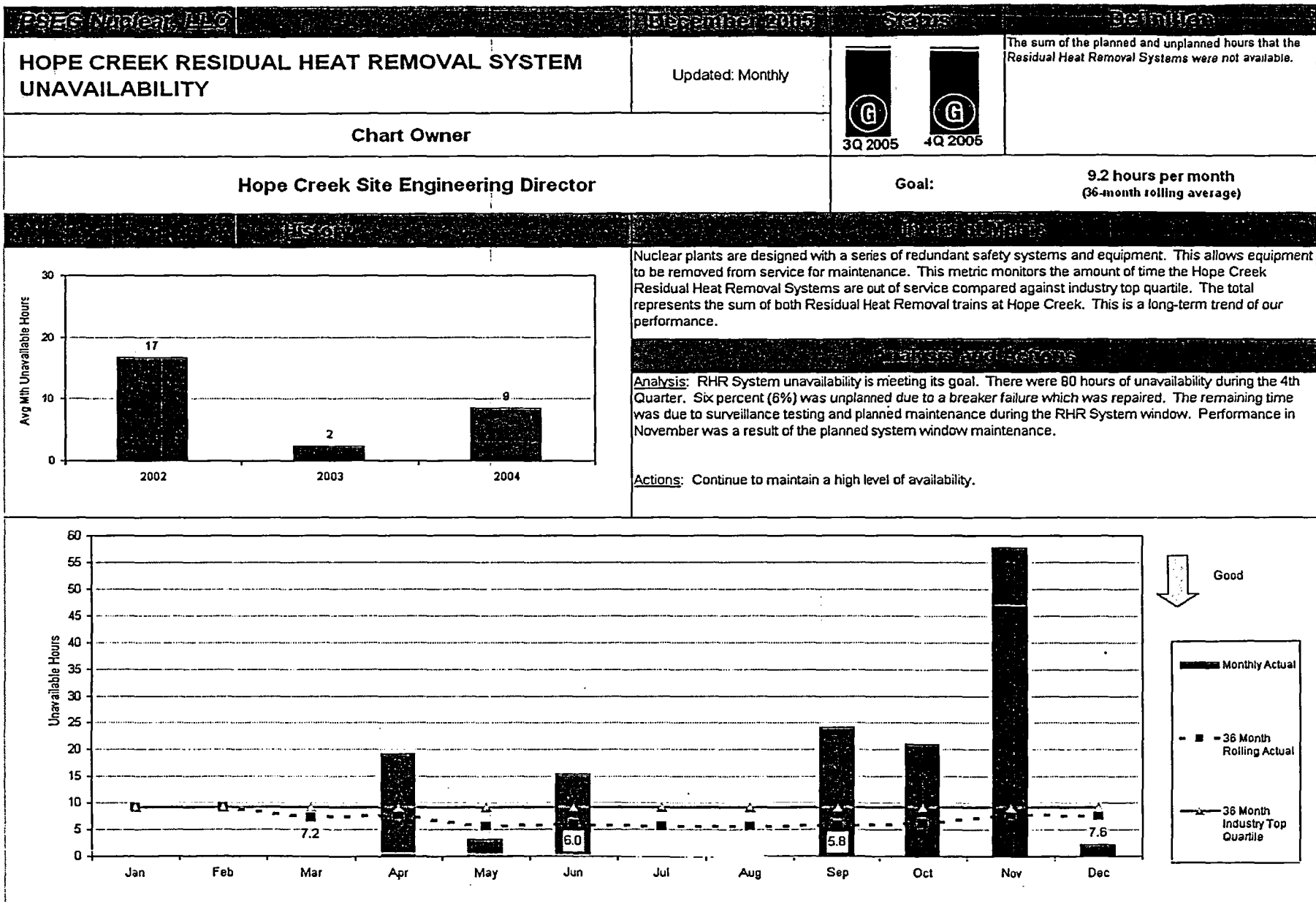


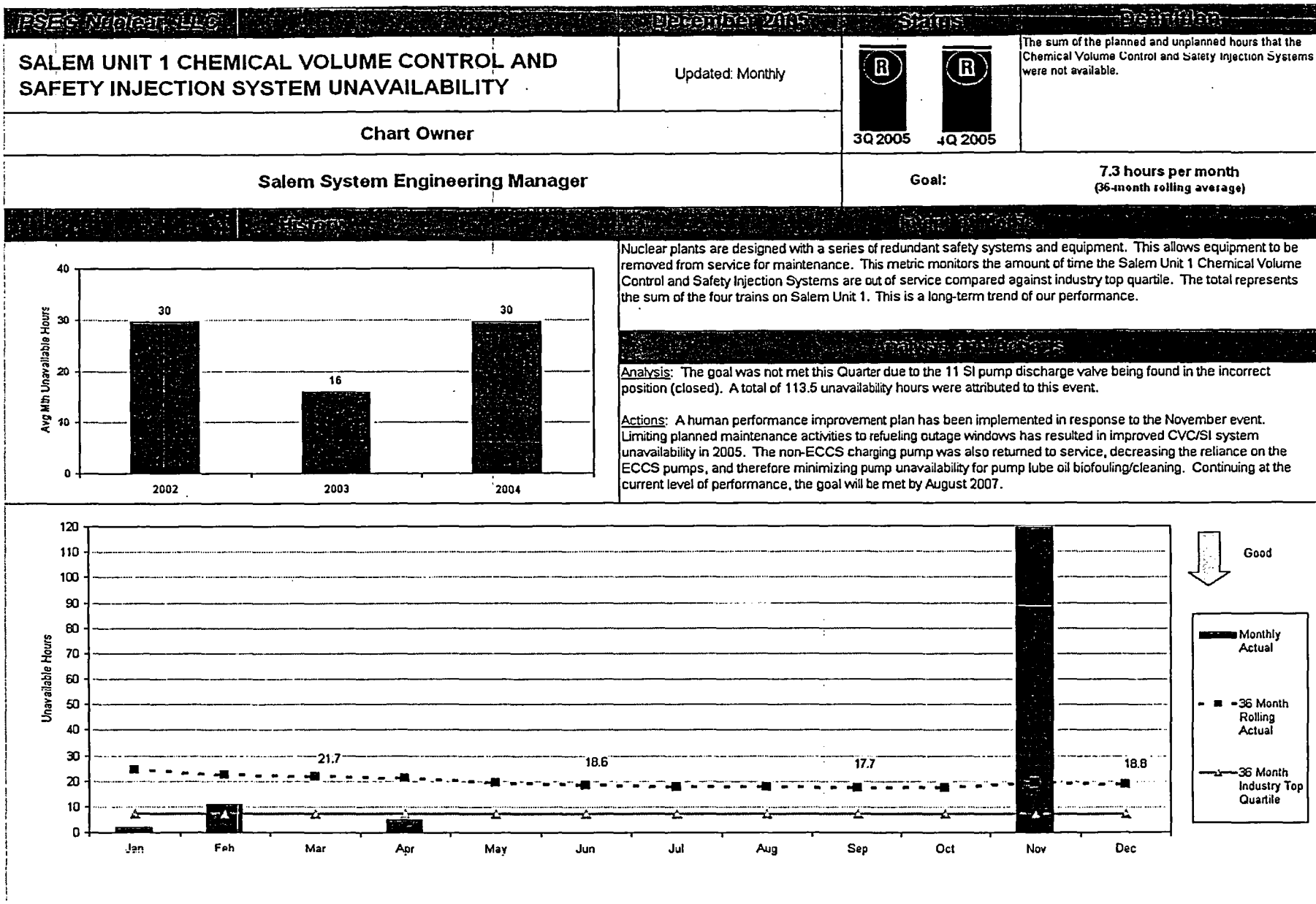
Good











# SALEM UNIT 2 CHEMICAL VOLUME CONTROL AND SAFETY INJECTION SYSTEM UNAVAILABILITY

Updated: Monthly



3Q 2005



4Q 2005

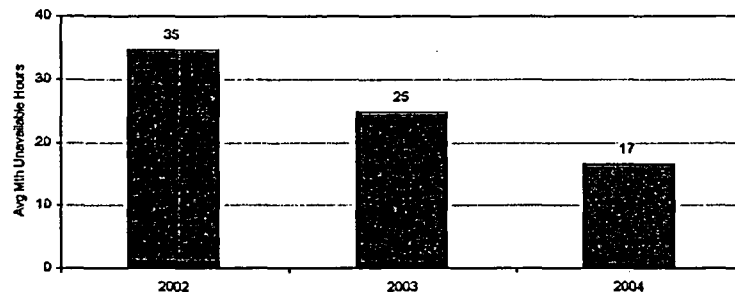
The sum of the planned and unplanned hours that the Chemical Volume Control and Safety Injection Systems were not available.

Chart Owner

Salem System Engineering Manager

Goal:

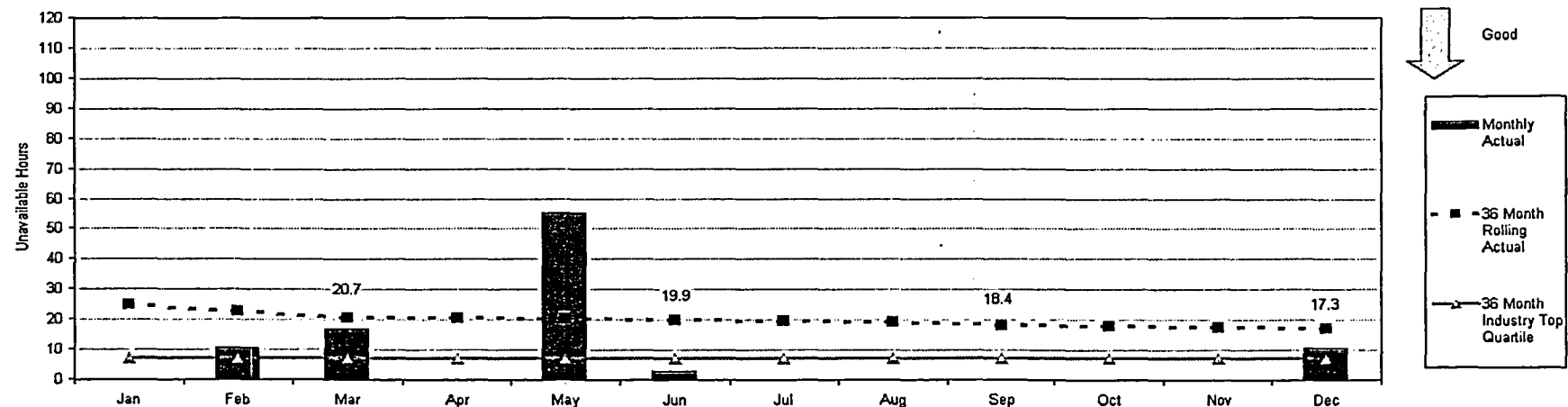
7.3 hours per month  
(36-month rolling average)



Nuclear plants are designed with a series of redundant safety systems and equipment. This allows equipment to be removed from service for maintenance. This metric monitors the amount of time the Chemical Volume Control and Safety Injection Systems are out of service compared against industry top quartile. The total represents the sum of the four trains on Salem Unit 2. This is a long-term trend of our performance.

**Analysis:** The goal was not met. Salem Unit 2 Chemical Volume Control and Safety Injection System unavailability was 17.3 hours at the end of the 4th Quarter versus a goal of 7.3 hours on a 36-month rolling average. In December, gear box cooler cleaning due to biofouling was required for the 21 charging pump.

**Actions:** Minimizing unavailability by limiting on-line maintenance work has resulted in improved system availability in 2005. In addition, operation of the 23 PDP has minimized unavailability of the centrifugal charging pumps by limiting the frequency of biofouling cleaning associated with the pumps' lube oil and gear box coolers. Continuing at the current level of performance, the goal will be met by January 2007.



Good

# HOPE CREEK HIGH PRESSURE INJECTION AND REACTOR CORE ISOLATION COOLING SYSTEM UNAVAILABILITY

Updated: Monthly



The sum of the planned and unplanned hours that the High Pressure Injection and Reactor Core Isolation Cooling Systems were not available.

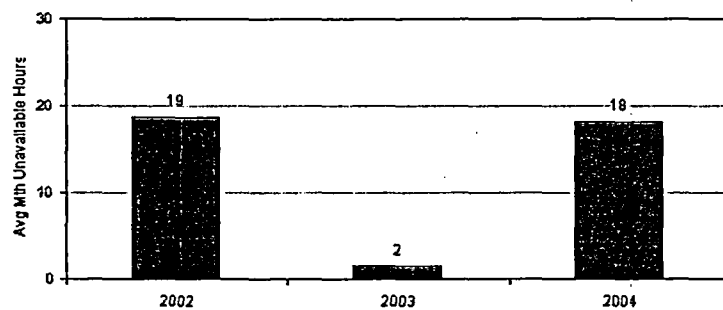
Chart Owner

Hope Creek Site Engineering Director

Goal:

14.6 hours per month  
(36-month rolling average)

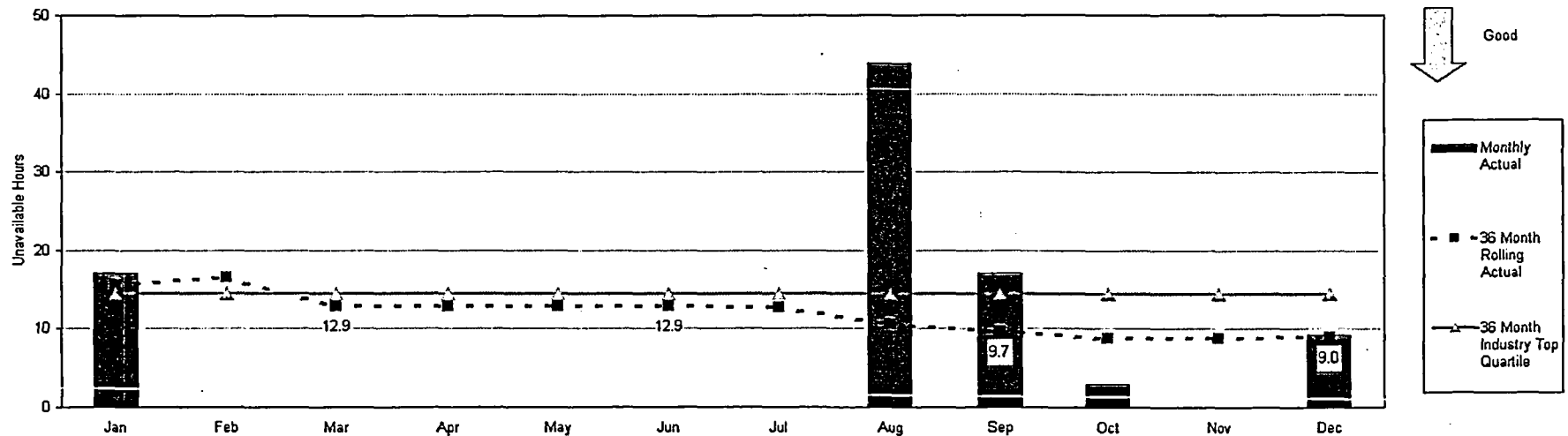
History



Nuclear plants are designed with a series of redundant safety systems and equipment. This allows equipment to be removed from service for maintenance. This metric monitors the amount of time the High Pressure Injection and Reactor Core Isolation Cooling Systems are out of service compared against industry top quartile. The total represents the sum of both systems at Hope Creek. This is a long-term trend of our performance.

**Analysis:** Hope Creek High Pressure Injection and Reactor Core Isolation Cooling System unavailability was 9.0 hours versus a goal of 14.6 hours on a 36-month rolling average. The goal was met. All unavailability hours incurred in the 4th Quarter were associated with planned maintenance activities.

**Actions:** Continue to maintain a high level of availability.



Good